THE

Medical and Physical Journal.

VOL. XVIII.] AUGUST, 1807. [NO. 102.

Printed for R. PHILLIPS, by W. Thorne, Red Lion Court, Fleet Street, London

REPORT *of the* ROYAL COLLEGE OF PHYSICIANS *of* LONDON, *on* VACCINATION. *With an* APPENDIX, *containing the Opinions of the Royal College of Physcians of Edinburgh and Dublin; and of the Royal Colleges of Surgeons of London, of Dublin, and of Edinburgh.*

THE Royal College of Physicians of London, having received his Majesty's commands, in compliance with an Address from the House of Commons, "to inquire into the state of Vaccine Inoculation in the United Kingdom, to report their opinion and observations upon that practice, upon the evidence which has been adduced in its support, and upon the Causes which have hitherto retarded its general adoption;" have applied themselves diligently to the business referred to them.

Deeply impressed with the importance of an inquiry which equally involves the lives of individuals and the public prosperity, they have made every exertion to investigate the subject fully and impartially. In aid of the knowledge and experience of the members of their own body, they have applied separately to each of the Licentiates of the College; they have corresponded with the Colleges of Physicians of Dublin and Edinburgh; with the Colleges of Surgeons of London, Edinburgh, and Dublin; they have called upon the Societies established for Vaccination, for an account of their practice, to what extent it has been carried on, and what has been the result of their experience; and they have, by public notice invited individuals to contribute whatever information, they had severally collected. They have in consequence been furnished with a mass of evidence communicated with the greatest readiness and candour, which enables them to speak with confidence upon all the principal points referred to them.

I. During eight years which have elapsed since Dr. Jenner made his discovery public, the progress of Vaccination has been rapid, not only in all parts of the United

Kingdom, but in every quarter of the civilized world. In the British islands some hundred thousands have been vaccinated, in our possessions in the East Indies upwards of 800,000, and among the nations of Europe the practice has become general. Professional men have submitted it to the fairest trials, and the public have, for the most part, received it without prejudice. A few indeed have stood forth the adversaries of Vaccination, on the same grounds as their predecessors who opposed the inoculation for the small-pox, falsely led by hypothetical reasoning in the investigation of a subject which must be supported, or rejected, upon facts and observation only. With these few exceptions, the testimony in favour of vaccination has been most strong and satisfactory, and the practice of it, though it has received a check in some quarters, appears still to be upon the increase in most parts of the United Kingdom.

II. The College of Physicians, in giving their Observations and Opinions on the practice of vaccination, think it right to premise, that they advance nothing but what is supported by the multiplied and unequivocal evidence which has been brought before them, and they have not considered any facts as proved but what have been stated from actual observation.

Vaccination appears to be in general perfectly safe; the instances to the contrary being extremely rare. The disease excited by it is slight, and seldom prevents those under it from following their ordinary occupations. It has been communicated with safety to pregnant women, to children during dentition, and in their earliest infancy; in all which respects it possesses material advantges over inoculation for the small-pox; which, though productive of a disease generally mild, yet sometimes occasions alarming symptoms, and is in a few cases fatal.

The security derived from vaccination against the small-pox, if not absolutely perfect, is as nearly so as can perhaps be expected from any human discovery; for amongst several hundred thousand cases, with the results of which the College have been made acquainted, the number of alleged failures have been surprisingly small, so much so, as to form certainly no reasonable objection to the general adoption of vaccination; for it appears that there is not nearly so many failures in a given number cf vaccinated persons, as there are deaths in an equal number of persons inoculated for the small-pox. Nothing can more clearly demonstrate the superiority of vaccination over the inoculation of the small-pox, than this consideration; and it

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is a most important fact, which has been confirmed in the course of this inquiry, that in almost every case, where the small-pox has succeeded vaccination, whether by inoculation or by casual infection, the disease has varied much from its ordinary course; it has neither been the same in the violence, nor in the duration of its symptoms, but has, with very few exceptions, been remarkably mild, as if the small-pox had been deprived, by the previous vaccine disease, of all its usual malignity.

The testimonies before the College of Physicians are very decided in declaring, that vaccination does less mischief to the constitution, and less frequently gives rise to other diseases, than the small-pox, either natural or inoculated.

The College feel themselves called upon to state this strongly, because it has been objected to vaccination, that it produces new, unheard-of, and monstrous diseases. Of such assertions no proofs have been produced, and, after diligent inquiry, the College believe them to have been either the inventions of designing, or the mistakes of ignorant men. In these respects then, in its mildness, its safety, and its consequences, the individual may look for the peculiar advantages of vaccination. The benefits which flow from it to society are infinitely more considerable; it spreads no infection, and can be communicated only by inoculation. It is from a consideration of the pernicious effects of the small-pox, that the real value of vaccination is to be estimated. The natural small-pox has been supposed to destroy a sixth part of all whom it attacks; and that even by inoculation, where that has been general in parishes and towns, about one in 300 has usually died. It is not sufficiently known, or not adverted to, that nearly one-tenth, some years more than one-tenth of the whole mortality in London, is occasioned by the small-pox; and however beneficial the inoculation of the small-pox may have been to individuals, it appears to have kept up a constant scource of contagion, which has been the means of increasing the number of deaths by what is called the natural disease. It cannot be doubted that this mischief has been extended by the inconsiderate manner in which great numbers of persons, even since the introduction of vaccination, are still every year inoculated with the small-pox, and afterwards required to attend two or three times a week at the places of inoculation, through every stage of their illness.

From this, then, the public are to expect the great and uncontroverted superiority of vaccination, that it com-

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municates no casual infection, and, while it is a protection to the individual, it is not prejudicial to the public.

III. The College of Physicians, in reporting their observations and opinions on the evidence adduced in support of vaccination, feel themselves authorised to state that a body of evidence so large, so temperate, and so consistent, was perhaps never before collected upon any medical question. A discovery so novel, and to which there was nothing analagous known in nature, though resting on the experimental observations of the inventor, was at first received with diffidence: it was not, however, difficult for others to repeat his experiments, by which the truth of his observations was confirmed, and the doubts of the cautious were gradually dispelled by extensive experience. At the commencement of the practice, almost all that were vaccinated were afterwards submitted to the inoculation of the small-pox; many underwent this operation a second, and even a third time, and the uniform success of these trials quickly bred confidence in the new discovery. But the evidence of the security derived from vaccination against the small-pox does not rest alone upon those who afterwards underwent variolous inoculation, although amounting to many thousands; for it appears, from numerous observations communicated to the College, that those who have been vaccinated are equally secure against the contagion of epidemic small-pox. Towns indeed, and districts of the country, in which vaccination had been general, have afterwards had the small-pox prevalent on all sides of them without suffering from the contagion. There are also in the evidence a few examples of epidemic small-pox having been subdued by a general vaccination. It will not, therefore, appear extraordinary, that many who have communicated their observations should state, that though at first they thought unfavourably of the practice, experience had now removed all their doubts.

It has been already mentioned, that the evidence is not universally favourable, although it is in truth nearly so, for there are a few who entertain sentiments differing widely from those of the great majority of their brethren. The College, therefore, deemed it their duty, in a particular manner to inquire upon what grounds and evidence the opposers of vaccination rested their opinions. From personal examination, as well as from their writings, they endeavoured to learn the full extent and weight of their objections. They found them without experience in vaccination, supporting their opinions by hearsay information,

tion, and hypothetical reasoning, and, upon investigating the facts which they advanced, they found them to be either misapprehended or misrepresented; or that they fell under the description of cases of imperfect small-pox, before noticed, and which the College have endeavoured fairly to appreciate.

The practice of vaccination is but of eight years standing, and its promoters, as well as opponents, must keep in mind, that a period so short is too limited to ascertain every point, or to bring the art to that perfection of which it may be capable. The truth of this will readily be admitted by those acquainted with the history of inoculation for the small-pox. Vaccination is now, however, well understood, and its character accurately described. Some deviations from the usual course have occasionally occurred, which the author of the practice has called spurious cow-pox, by which the public have been misled, as if there were a true and a false cow-pox; but it appears, that nothing more was meant, than to express irregularity or difference from that common form and progress of the vaccine pustule from which its efficacy is inferred. Those who perform vaccination ought therefore to be well instructed, and should have watched with the greatest care the regular progress of the pustule, and learnt the most proper time for taking the matter. There is little doubt that some of the failures are to be imputed to the inexperience of the early vaccinators, and it is not unreasonable to expect that farther observation will yet suggest many improvements that will reduce the number of anomalous cases, and furnish the means of determining, with greater precision, when the vaccine disease has been effectually received.

Though the College of Physicians have confined themselves in estimating the evidence to such facts as have occurred in their own country, because the accuracy of them could best be ascertained, they cannot be insensible to the confirmation these receive from the reports of the successful introduction of vaccination, not only into every part of Europe, but throughout the vast Continents of Asia and America.

IV. Several causes have had a partial operation in retarding the general adoption of vaccination; some writers have greatly undervalued the security it affords, while others have considered it to be of a temporary nature only; but if any reliance is to be placed on the statements which have been laid before the College, its power of protecting the human body from the small-pox, though

not perfect indeed, is abundantly sufficient to recommend it to the prudent and dispassionate, especially as the small-pox, in the few instances where it has subsequently occurred, has been generally mild and transient. The opinion that vaccination affords but a temporary security is supported by no analogy in nature, nor by the facts which have hitherto occurred. Although the experience of vaccine inoculation be only of a few years, yet the same disease, contracted by the milkers of cows, in some districts has been long enough known to ascertain that in them, at least the unsusceptibility of the small-pox contagion does not wear out by time. Another cause, is the charge against vaccination of producing various new diseases of frightful and monstrous appearance.

Representations of some of these have been exhibited in prints in a way to alarm the feelings of parents, and to infuse dread and apprehension into the minds of the uninformed. Publications with such representations have been widely circulated, and though they originate either in gross ignorance, or wilful misrepresentation, yet have they lessened the confidence of many, particularly of the lower classes, in vaccination; no permanent effects, however, in retarding the progress of vaccination, need be apprehended from such causes, for, as soon as the public shall view them coolly and without surprize, they will excite contempt, and not fear.

Though the College of Physicians are of opinion that the progress of vaccination has been retarded in a few places by the above causes, yet they conceive that its general adoption has been prevented by causes far more powerful, and of a nature wholly different. The lower orders of society can hardly be induced to adopt precautions against evils which may be at a distance; nor can it be expected from them, if these precautions are attended with expence. Unless therefore, from the immediate dread of epidemic small pox, neither vaccination nor inoculation appear at any time to have been general, and when the cause of terror has passed by, the public have relapsed again into a state of indifference and apathy, and the salutary practice has come to a stand. It is not easy to suggest a remedy for an evil so deeply imprinted in human nature. To inform and instruct the public mind may do much, and it will probably be found that the progress of vaccination in different parts of the United Kingdom will be in proportion to that instruction. Were encouragement given to vaccination, by offering it to the poorer

poorer classes without expence, there is little doubt but it would in time supersede the inoculation for the small-pox, and thereby various sources of variolous infection would be cut off; but till vaccination becomes general, it will be impossible to prevent the constant recurrence of the natural small-pox by the means of those who are inoculated, except it should appear proper to the legislature to adopt, in its wisdom, some measure by which those who still, from terror or prejudice, prefer the small-pox to the vaccine disease, may, in thus consulting the gratification of their own feelings, be prevented from doing mischief to their neighbours.

From the whole of the above considerations, the College of Physicians feel it their duty strongly to recommend the practice of vaccination. They have been led to this conclusion by no pre-conceived opinion, but by the most unbiassed judgment, formed from an irresistible weight of evidence which has been laid before them. For when the number, the respectability, the disinterestedness, and the extensive experience of its advocates, is compared with the feeble and imperfect testimonies of its few opposers; and when it is considered that many, who were once adverse to vaccination, have been convinced by further trials, and are now to be ranked among its warmest supporters, the truth seems to be established as firmly as the nature of such a question admits; so that the College of Physicians conceive that the public may reasonably look forward with some degree of hope to the time when all opposition shall cease, and the general concurrence of mankind shall at length be able to put an end to the ravages at least, if not to the existence, of the small-pox.

LUCAS PEPYS, President.

Royal College of Physicians
10th April, 1807.

Ja. Hervey, Register.

APPENDIX.

No. 1.

To the Royal College of Physicians of London,

GENTLEMEN,

I AM ordered by the King and Queen's College of Physicians, in Ireland, to thank the Royal College of Physicians of London for the communication they have had the honour to receive from them, of certain propositions relative to Vaccination, whereon His Majesty has been pleased to direct an inquiry to be instituted, and in the prosecution

of which, the co-operation of the College in Ireland is requested.

And I am directed to acquaint you, that the said College having referred the investigation of these propositions to a Committee, have received from them a Report, of which the enclosed is a copy; and that they desire the same may be considered as containing their opinion upon the subject

I have the honour to be, Gentlemen,
Your most obedient humble Servant,
HUGH FERGUSON, Register.

By order of the King and Queen's College of Physicians in Ireland.

Dublin, Nov. 11, 1806.

"The practice of Vaccination was introduced into this city about the beginning of the year 1801, and appears to have made inconsiderable progress at first. A variety of causes operated to retard its general adoption, amongst which the novelty of the practice, and the extraordinary effects attributed to Vaccination, would naturally take the lead.

"Variolous Inoculation had been long, almost exclusively, in the hands of a particular branch of the profession, whose prejudices and interests were strongly opposed to the new practice; and by their being the usual medical attendants in families, and especially employed in the diseases of children, their opinions had greater effect upon the minds of parents. The Small-pox is rendered a much less formidable disease in this country by the frequency of Inoculation for it, than it is in other parts of His Majesty's dominions, where prejudices against Inoculation have prevailed; hence parents, not unnaturally, objected to the introduction of a new disease, rather than not recur to that, with the mildness and safety of which they were well acquainted.

"In the beginning of the year 1804, the Cow-pox Institution was established, under the patronage of the Earl of Hardwicke, and it is from this period that we may date the general introduction of Vaccination into this city, and throughout all parts of Ireland.

"The success of the Institution, in forwarding the new practice, is to be attributed in a great measure to the respectability of the Gentlemen who superintend it, and to the diligence, zeal, and attention of Dr. Labatt, their Secretary and Inoculator. In order to shew the progress which as been made in extending Vaccination, your Committee refer to the Reports of the Cow-pox Institution for the last two years, and to Extracts from their Register for the present year.

	Patients Inoculated.	Packets issued to Practitioners in general.	Packets to Army Surgeons.
1804 -	578	776	236
1805 -	1,032	1,124	178
1806 -	1,356	1,340	220
Total -	2,966	3,240	634

" In the above statement, the numbers are averaged to the end of the present year, on the supposition of patients resorting to the Institution as usual. The correspondence of the Institution appears to be very general throughout every part of Ireland, and by the accounts received, as well from Medical Practitioners as others, the success of Vaccination seems to be uniform and effectual. At the present period, in the opinion of your Committee, there are few individuals in any branch of the profession, who oppose the practice of Vaccination in this part of His Majesty's Dominions.

" It is the opinion of your Committee, that the practice of Cow-pox Inoculation is safe, and that it fully answers all the purposes that have been intended by its introduction. At the same time, your Committee is willing to allow that doubtful cases have been reported to them as having occurred, of persons suffering from Small-pox, who had been previously vaccinated. Upon minute investigation, however, it has been found that these supposed instances originated generally in error, misrepresentation, or the difficulty of discriminating between Small-pox and other eruptions, no case having come to the knowledge of your Committee, duly authenticated by respectable and competent judges, of genuine Small-pox succeeding the regular Vaccine disease.

" The practice of Vaccination becomes every day more extended; and, when it is considered that the period at which it came into general use in Ireland is to be reckoned from so late a date, your Committee is of opinion, that it has made already as rapid a progress as could be expected.

(Signed) " JAMES CLEGHORN.
" DANIEL MILLS.
" HUGH FERGUSON."

No. 2.

Physicians Hall, Edinburgh, Nov. 26, 1806.

GENTLEMEN,

THE Royal College of Physicians of Edinburgh have but little opportunity themselves of making observations on

Vaccination, as that practice is entirely conducted by Surgeon Apothecaries, and other Medical Practitioners not of their College, and as the effects produced by it are so inconsiderable and slight, that the aid of a Physician is never required.

The College know that in Edinburgh it is universally approved of by the Profession, and by the higher and middle ranks of the community, and that it has been much more generally adopted by the lower orders of the people than ever the Inoculation for Small-pox was, and they believe the same to obtain all over Scotland.

With regard to any causes which have hitherto prevented its general adoption, they are acquainted with none, except the negligence or ignorance of parents among the common people, or their mistaken ideas of the impropriety or criminality of being accessary to the production of any disease among their children, or the difficulty or impossibility, in some of our Country Districts, of procuring Vaccine matter, or a proper person to inoculate.

The evidence in favour of Vaccination appeared to the Royal College of Physicians of Edinburgh so strong and decisive, that in May last, they spontaneously and unanimously elected Dr. Jenner an Honorary Fellow of their College;—a mark of distinction which they very rarely confer, and which they confine almost exclusively to Foreign Physicians of the first eminence.

They did this with a view to publish their opinion with regard to Vaccination, and in testimony of their conviction of the immense benefits which have been, and which will in future be derived to the world, from Inoculation for the Cow-pox, and as a mark of their sense of Dr. Jenner's very great merits and ability in introducing and promoting this invaluable practice.

I have the honour to be, Gentlemen,
Your most obedient humble Servant,
TH. SPENS, C. R. M. Ed. Pr.

To the Royal College of Physicians of London.

No. 3.

At a Special Court of Assistants of the Royal College of Surgeons, convened by order of the Master, and holden at the College on Tuesday the 17th day of March 1807;

Mr. Governor LUCAS in the Chair:

Mr. LONG, as Chairman of the Board of Curators, reported, That the Board are now ready to deliver their Report on the subject of vaccination.

It was then moved, seconded, and Resolved, That a Report from the Board of Curators, on the subject of vac-

cination, which was referred to their consideration by the Court of Assistants, on the 21st day of November last, be now received.

Mr. Long then delivered to Mr. Governor Lucas (presiding in the absence of the Master) a Report from the Board of Curators.

It was then moved, seconded, and Resolved, That the Report delivered by Mr. Long, be now read; and it was read accordingly, and is as follows:

To the Court of Assistants of the Royal College of Surgeons in London.

THE Report of the Board of Curators, on the subject of Vaccination, referred to them by the Court, on the 21st day of November 1806; made to the Court on the 17th of March, 1807.

THE Court of Assistants having received a Letter from the Royal College of Physicians of London, addressed to this College, stating, That His Majesty had been graciously pleased, in compliance with an Address from the Honourable House of Commons, to direct His Royal College of Physicians of London to inquire into the state of Vaccination in the United Kingdom, to Report their Observations and Opinion upon that Practice, upon the Evidence adduced in its support, and upon the Causes which have hitherto retarded its general adoption; that the College were then engaged in the investigation of the several propositions thus referred to them, and requesting this College to co-operate and communicate with them, in order that the Report thereupon might be made as complete as possible.

And having, on the 21st day of November last, referred such letter to the consideration of the Board of Curators, with authority to take such steps respecting the contents thereof as they should judge proper, and report their proceedings thereon, from time to time, to the Court:—The Board proceeded with all possible dispatch to the consideration of the subject.

The Board being of opinion that it would be proper to address circular letters to the Members of this College, with a view of collecting evidence, they submitted to the consideration of the Court, holden on the 15th day of December last, the drafts of such letter as appeared to them best calculated to answer that end; and the same having been approved by the Court, they caused copies thereof to be sent to all the Members of the College in the United Kingdom, whose residence could be ascertained, in the following form; *viz.*

"Sir,

"The Royal College of Surgeons being desirous to co-operate with the Royal College of Physicians of London, in obtaining information respecting vaccination, submit to you the following Questions, to which the favour of your Answer is requested.

"By order of the Court of Assistants.

"Okey Belfour, Secretary."

Lincoln's-Inn Fields, Dec. 15, 1806.

"1st. How many persons have you vaccinated?

"2d. Have any of your patients had the small-pox after vaccination? In the case of every such occurrence, at what period was the vaccine matter taken from the vesicle? How was it preserved? How long before it was inserted? What was the appearance of the inflammation? And what the interval between vaccination and the variolous eruption?

"3d. Have any bad effects occurred in your experience in consequence of vaccination? And if so, what were they?

"4th. Is the practice of vaccination increasing or decreasing in your neighbourhood; if decreasing, to what cause do you impute it?"

To such letters the Board have received 426 answers; and the following are the results of their investigation:

The number of persons, stated in such letters to have been vaccinated, is 164,381.

The number of cases in which small-pox had followed vaccination is 56.

The Board think it proper to remark under this head, that, in the enumeration of cases in which small-pox has succeeded vaccination, they have included none but those in which the subject was vaccinated by the surgeon reporting the facts.

The bad consequences which have arisen from vaccination are, eruptions of the skin in 66 cases, and inflammation of the arm in 24 instances, of which three proved fatal.

Vaccination, in the greater number of Counties from which Reports have been received, appears to be increasing; it may be proper however to remark, that, in the Metropolis, it is on the decrease.

The principal reasons assigned for decrease are,

Imperfect vaccination,

Instances of small-pox after vaccination,

Supposed bad consequences,

Publications against the practice,

Popular prejudices.

And such Report having een considered, it was moved, seconded, and

Resolved, that the Report now read, be adopted by this Court, as the answer of the Court to the letter of the Royal College of Physicians, of the 23d of October last, on the subject of Vaccination.

Resolved, That a copy of these Minutes and Resolutions, signed by Mr. Governor Lucas (presiding at this Court in the absence of the Master) be transmitted by the Secretary to the Register of the Royal College of Physicians. (Signed) WM. LUCAS.

No. 4,

Edinburgh, March 3d, 1807.

SIR,

I mentioned in my former letter, that I would take the earliest opportunity of laying before the Royal College of Surgeons of Edinburgh, the communication with which the Royal College of Physicians of London had honoured them, on the 23d of October last:

I am now directed by the Royal College to send the following answer on that important subject.

The practice of vaccine inoculation, both in private and at the Vaccine Institution established here in 1801, is increasing so rapidly, that for two or three years past, the small-pox has been reckoned rather a rare occurrence, even amongst the lower order of the inhabitants of this city, unless in some particular quarters about twelve months ago, and, among the higher ranks of the inhabitants, the disease is unknown.

The Members of the Royal College of Surgeons have much pleasure in reporting, That, as far as their experience goes, they have no doubt of the permanent security against the small-pox which is produced by the constitutional affection of the cow-pox; and that such has hitherto been their success in vaccination, as also to gain for it the confidence of the public, insomuch that they have not been required, for some years past, to inoculate any person with small-pox who have not previously undergone the inoculation with the cow-pox.

The Members of the Royal College have met with no occurrence in their practice of cow-pox inoculation which could operate in their minds to its disadvantage, and they beg leave particularly to notice, that they have seen no instance of obstinate eruptions, or of new and dangerous diseases, which they could attribute to the introduction among mankind of this mild preventive of the small-pox. The Royal College of Surgeons know of no causes which have hitherto retarded the adoption of vaccine ino-

culation here; on the contrary, the practice has become general within this city: and from many thousand packets of vaccine matter having been sent by the Members of the Royal College, and the Vaccine Institution here, to all parts of the country, the Royal College have reason to believe that the practice has been as generally adopted throughout this part of the United Kingdom as could have been expected from the distance of some parts of the country from proper medical assistance, and other circumstances of that nature.

I have the honour to be, Sir,
Your most obedient servant,
WM. FARQUHARSON,
President of the Royal College and Incorporation of Surgeons of Edinburgh.

No. 5

Royal College of Surgeons in Ireland,
Dublin, Feb. 4th, 1807.

SIR,

I am directed to transmit to you the enclosed Report of a Committee of the College of Surgeons in Ireland, to whom was referred a Letter from the Royal College of Physicians in London, relative to the present state of vaccination in this part of the United Kingdom; and to state, that the College of Surgeons will be highly gratified by more frequent opportunities of corresponding with the English College of Physicians on any subject which may conduce to the advancement of Science, and the welfare of the public.

I have the honour to be, Sir,
Your most obedient humble Servant,
JAMES HENTHORN, Sec.

At a meeting of the Royal College of Surgeons in Ireland, holden at their Theatre, on Tuesday the 13th day of January 1807.

FRANCIS M'EVOY, ESQ. President.

Mr. Johnson reported from the committee, to whom was referred a letter from the College of Physicians, London, relative to the present state of Vaccination in the United Kingdom, &c. &c. That they met, and came to the following Resolutions:

That it appears to this Committee, That Inoculation with Vaccine Infection is now very generally adopted by the surgical practitioners in this part of the United Kingdom, as a preventive of Small-pox.

That it appears to this Committee, That from the 25th

day of March 1800 to the 25th of November 1806, 11,504 persons have been inoculated with vaccine infection at the dispensary for infant poor, and 2,831 at the cow-pox institution, making a total of 14,335, exclusive of the number inoculated at hospitals and other places, where no registry is made and preserved.

That it is the opinion of this Committee, That the cow-pox has been found to be a mild disease, and rarely attended with danger, or any alarming symptom, and that the few cases of small-pox which have occurred in this country, after supposed vaccination, have been satisfactorily proved to have arisen from accidental circumstances, and cannot be attributed to the want of efficacy in the genuine vaccine infection as a preventive of small-pox.

That it is the opinion of this Committee, That the causes which have hitherto retarded the more general adoption of vaccination in Ireland, have, in a great measure, proceeded from the prejudices of the lower classes of the people, and the interest of some irregular practitioners.

To which Report the College agreed.

Extract from the Minutes.

JAMES HENTHORN, Sec.

An Anniversary Oration on the Subject of Quarantines, delivered to the Philadelphia Medical Society; by CHARLES CALDWELL, M. D.

GENTLEMEN OF THE SOCIETY,

THE profession of medicine is, at present, stripped of much of the dark cabalistical covering, which once concealed it from the public eye. The knowledge of it has, long since, ceased to be regarded as a *speciale Dei donum,* a peculiar endowment from above, and is now justly ranked, with other scientific pursuits, among the objects of human attainment. Nor are its most illustrious cultivators any longer venerated as the descendants of the gods. Still, however, it preserves, and is worthy of preserving, a distinguished place in the catalogue of the sciences. It is still far from forming any part of that common stock of information, collected by mankind in their passage thro' life. It is, perhaps, more peculiarly than any other, an insulated profession, and that of such extent and variety, as to be wholly beyond the reach and comprehension of all,

all, except its particular votaries; for it is worthy of remark, that no one devoted to other pursuits, has ever become eminent in the science and the profession of medicine. This branch of human knowledge alone, affords matter sufficient for the exercise of the highest talents, applied with unceasing industry, and continued in action during the longest life.

If these observations be true (and I presume their truth will not be controverted) it is peculiarly fortunate that medical subjects, though frequently the topics of general and promiscuous discussion, are but seldom the objects of civil legislation. Circumstances have, however, occasionally occurred, to cause some of them to be acted on by legislative bodies. It is to be lamented that this has, of late years, been the case, in various instances, in our own country. I speak of the event as a matter of regret, because the deliberations on this subject have not only been wholly inadequate to the end in view; but, what is much worse, they originated in error, were conducted without knowledge, and terminated in mischief. If they have not actually increased the very evil they were intended to prevent, they have, at least, without diminishing it, associated it with others of their own creation. They have added another, and I hope a convincing proof, to those before existing, that the science of medical jurisprudence is beyond the sphere of common lawgivers, and that none but medical characters should ever be deputed to its high and interesting concerns.

You no doubt perceive, Gentlemen, that I speak in allusion to the systems of quarantine, established of late by several of our state legislatures, with a view to protect our shores from the ravages of pestilence. Though these establishments were, probably, the result of some reflection, and certainly of the best intentions, on the part of their founders, yet experience has proved them to be erroneous in their principles, and destructive in their tendency. Considered in a national point of view, they are worse—much worse, than the evil they were intended to prevent. Growing, however, as they have done, out of the present state of public opinion relative to the origin and nature of our pestilential diseases, and being perfectly accommodated to that state, nothing short of a general and radical change in this opinion, would be adequate either to abolish or to reform them. But such a change cannot be produced by any single effort, however wise or however powerful. It must be a work of time, and can be accomplished only by a zealous co-operation of many individuals.

But

But to whom shall the important work of effecting this change be entrusted? and what description of characters is best calculated to conduct it to a successful issue? Is it to the lawyer, the statesman, or the divine, that the management and fate of this business should be committed? or, is it not rather to the votaries of medicine, who, from their knowledge of the subject, are alone equal to the difficulty of the task?

To you, Gentlemen, I hope and believe that no inconsiderable part of the honour of this enterprise will belong; and, trust me, it is an enterprise worthy of your ambition, worthy of your exertions; an enterprise not confined in its effects to your own country, nor limited in its duration to the present times; but enfolding in its wide embrace, nations the most distant, and extending to ages the most remote. It is an enterprise which will, in future times, be regarded as the first effectual blow aimed at the existence of that false idol, that seductive Dagon in medicine, which, for nearly four centuries, has commanded the homage of the nations of Christendom.

It is proper, Gentlemen, that you should be duly sensible of your own peculiar fitness, both as to qualifications and opportunities, for co-operating in this important enterprise. Devoted as you are, and must be, by the nature of your profession, to observation and inquiry, you will be naturally looked up to by your fellow-citizens as sources of correct information and wholesome advice, particularly in matters relating to the science of medicine. Established, as you will shortly be, in the practice of your profession, in every part of the United States, you will be capable, from your widely extended influence, of acting, in some measure, on the mind of the whole nation at once. By cultivating, therefore, an unity of sentiment, and by observing a proper concert in your measures and exertions, on any one point, it will be in your power to produce, in relation to that point, somewhat of a national effect. The numerous impressions made by each of you in person, spreading from you individually, as from so many centres, will expand and unite, like adjacent ripples on the peaceful water, till the whole of your fellow-citizens shall feel the impulse. Let the point you may choose to act on be, *the errors into which our state legislatures have fallen, relative to systems of quarantine,* and the evils arising from these systems cannot fail to be done away.

Having then the power to subserve the interest of truth and of your country, on this subject, the exercise of that

power must be left to your own wisdom and discretion. I have no doubt, however, but you will be found as prompt and zealous, as you are capable of being efficacious and useful, in your exertions. To convince you of my readiness to co-operate with you, to the full extent of my abilities, and even to expose myself in the front of this war against error and prejudice, I will here submit to your consideration a few remarks on the subject of quarantines. Perhaps a brief view of the origin of these institutions, and of the circumstances attending their first establishment, may aid us in judging of their rationality and usefulness.

The first Lazaretto and system of quarantine, of which we have any account, were established at Venice, in the year 1448, during the ravages of a very destructive pestilence. Not long after this, similar institutions were erected at Marseilles, Genoa, Leghorn, Malta, Messina, Zante, Spezia, and various other European ports, where they have continued, without interruption or any material alteration, to the present day. It must be acknowledged, therefore, that these establishments have the sanction of considerable antiquity to recommend them; and this antiquity has been adduced by some writers as an argument in favour of their great utility, and of the soundness of the principles on which they are founded. Had they not, say these authors, been proved by experience to be effectual and unequivocal guardians of public health, they would long since have fallen into disrepute and been abolished; but this mode of reasoning, though somewhat plausible and imposing, is highly erroneous. Admit antiquity as an infallible test of excellence, and then every institution becomes more valuable, in proportion as it acquires a greater age.

In matters where physical science is concerned, the antiquity of establishments, unless they have been frequently altered and amended, is an argument against their excellence rather than in favour of it. The course of science is known to be progressive. As mankind advance in their knowledge of nature, they find it necessary to make frequent changes and innovations in long established opinions and systems, and sometimes to abandon them altogether. This is, perhaps, more particularly the case in things relating to the science of medicine; for I believe it to be true, that medical opinions have undergone more numerous and more rapid changes than those connected with any other branch of philosophy.

If we advert to the circumstances of the *time* in which systems

systems of quarantine were first established, we shall derive no argument in favour of them from that quarter. On the other hand, we shall be led to suspect, that they were founded on principles of superstition and prejudice, rather than on those of reason and science. The fifteenth century, which gave birth to these institutions, was a period of physical darkness throughout the world. This was peculiarly the case in Italy, and in the south of Europe in general, where the human mind was led most astray by the delusive wiles of priest-craft, and groaned under the heaviest load of papal tyranny; though at that time, polite literature was cultivated with considerable success in some of the Italian States, particularly at Florence and in other parts of Tuscany, yet Europe does not appear to have been able to boast a single physician or philosopher of real eminence. The whole genius of the age was devoted to warfare, poetry, painting, sculpture, and ecclesiastical learning. As yet, the study of nature, by experiment and observation, the only way in which any progress can be made in physical science, was not only neglected, but wholly unknown. The genius of Bacon, the true father of modern philosophy, had not yet sent forth its illuminating beams. Although a few physicians of that period have transmitted their names and their writings to posterity, yet these writings exhibit little else than a strange discordant mixture of the errors, absurdities, and extravagances of the time. As these writers appear to have had no knowledge whatever of the real causes of disease, they have indulged themselves in the most unbounded flights of fancy and superstition, in search of imaginary causes; hence they derived some diseases from astral and planetary influence, others from demoniacal influence, and others from the immediate agency of heaven. To this latter class belonged the *pestilence* itself, the very disease for the prevention of which, systems of quarantine were about the same time erected.

At first view, there appears to be, in this particular instance, a striking inconsistency between the doctrines and the practicable establishments of the age; but on a more careful examination of the subject, this seeming inconsistency vanishes. It must be recollected that in the fifteenth century, the fervid enthusiasm, which had previously impelled the hosts of Europe to carry their arms into Asia in the holy wars, had not yet entirely subsided in the breasts of their descendants. The countries of the East continued still to be regarded with mingled emotions

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of reverence and abhorrence; reverence for the soil which had been rendered sacred by the footsteps and blood of the Messiah, and abhorrence of the idolatrous and impious rites by which that soil was daily polluted. The infidels by whom these abominations were committed, not only throughout the country where the gospel of life had been first promulgated, but even on the hill of Calvary itself, were considered as the proper and peculiar objects of divine indignation. On these heretics therefore, it was believed that the Deity had, by his own immediate act, sent down the destroying *pestilence*, as a punishment for their disbelief of the gospel, and their disregard for the precepts of his Son. Like the late pestilential diseases of the United States, the Asiatic pestilence was *then* erroneously regarded as a *new* disease. But, as it was deemed both new and of supernatural origin, it was considered as also possessed of certain extraordinary properties. Among these was, *its power of being communicated from one country to another*. Although this disease had been, in reality, known from the earliest times, yet, previously to this period, no such power had ever been attributed to it. The fleets and armies of the ancient Greeks and Romans had repeatedly visited Egypt and the other provinces of the East, and returned again to their native countries, without the least restraint or precaution; so had the troops of the various European nations, during the continuance of the holy wars; yet, in these instances, no suspicion appears to have been entertained of the introduction of the Asiatic pestilence into any part of Europe. But we know that this disease raged several times among the crusaders whilst in Asia, as well as in many of the armies of ancient Rome.

Such, then, appears to have been the origin of the doctrine of the importation of pestilence into Christendom. A malignant and fatal disease was believed to have been inflicted as a punishment from heaven, on the infidels of the East. This disease was further believed to be communicated by contagion, through the channels of commerce, to the Christians of the West; and, for the prevention of such a calamity among the latter, systems of quarantine were devised and erected.

But, there was probably another cause which assisted in inducing the inhabitants of Europe, to consider the pestilence as introduced among them from the shores of Asia. This cause also had an indirect relation to the holy wars. The crusaders, on their return from the East, though they were

were never charged with the introduction of pestilence, are known to have brought along with them the small-pox, as one of the rewards of their pious expeditions. This circumstance would be likely to induce their descendants, who suffered grievously from that loathsome and destructive complaint, to regard the land polluted by the infidels, as the proper nursery of many other formidable diseases. Having certainly derived one of their calamities from that region, it was not unnatural for them, in their prejudiced and very limited view of things, to look to the same quarter for other evils of a similar nature. Even at the present day, there are certain strange and irrational notions entertained on this subject. The countries of Asia are still considered by many as the birth-place of particular diseases, which cannot originate in Europe or America, although the climates of these several regions are, in many places, precisely similar, and all their other physical causes are capable of operating with the same degree of force. Such sentiments, like the dreams of the physicians of the fifteenth century, are at open war with the very rudiments of philosophy.

There is still a further circumstance, which also contributes to give a very superstitious complexion to the origin of quarantines. The term itself imports, that *forty days* constituted the period of time, deemed necessary to be set apart for the purification of things infected. But the adoption of this period cannot be considered as the result of a philosophical inquiry, relative to the nature of pestilential poison, and the space of time requisite for its removal or destruction. It is derived merely from a superstitious regard for the number *forty*, on account of the accidental relation which that number bears to certain events and circumstances recorded in the Old and New Testaments. Thus, the Israelites were *forty* years in traversing the wilderness between Egypt and the Land of Promise. Under the Laws of Moses, the term of *forty* days was necessary for the completion of certain purificatory processes. Christ fasted *forty* days in the wilderness, for the purpose, as some commentators allege, of purifying his body from all such passions and propensities, as might tend to render it disobedient to the dictates of the spirit. Therefore, said the priests, and other superstitious zealots of the day, *a quarantine*, or lustration of forty days, is requisite for the cleansing of vessels, and other articles, contaminated by pestilential contagion.

Such, then, were the time when, and the circumstances under which, lazarettoes and systems of quarantine were first established by the nations of Europe. The age was a period of great darkness, and the whole business appears to have originated in, and to have been deeply tinctured by, the religious bigotry and delusion of the times. As a further evidence of this bigotry, it may be observed, that lazarettoes and pest-houses were, at first, entrusted almost exclusively to the care of ecclesiastics, whose piety and sacred character were supposed to be a shield against the arrows of contagion. Nor have the rules, regulations, and general management of these institutions undergone any very material amendment or alteration, even down to the present day. In the south of Europe, lazarettoes and quarantine establishments are in nearly the same condition, and under nearly the same government now, that they were three hundred years ago. The light which, like a day star, has burst forth in all departments of physical science, does not appear to have penetrated, as yet, the ancient night of these establishments. They are, in almost as high a degree, overwhelmed by prejudice, superstition, and error, at present, as they were at the time of their first institution. Yet have they served as the chief models for similar establishments in most other parts of Europe. Hence, when the celebrated Howard set out on his travels to acquire a knowledge of quarantines for the benefit of his country, he directed his course to the shores of the Mediterranean. Yet, from the account which that writer has himself given of the several pest-houses and lazarettoes, which he visited in Italy and elsewhere, they appear to the eye of philosophy, much better calculated to generate than to prevent pestilential diseases; for they are mere dungeons of dampness, filth, and putrefaction. The ceremonies through which all persons and articles arriving at them from sickly or suspected places are obliged to pass, are as unmeaning and preposterous as any of the rites of the most superstitious form of worship. Indeed, such is the perverted state of these establishments, that (supposing their continuance to be necessary at all) it calls for the reforming hand of a medical Luther, or a Calvin, no less than the abuses of the Church did during the pontificate of Leo X. If circumstances do not even demand an entire demolition of them (which I am persuaded they do) they demand, at least, their complete regeneration.

In reply to these observations, it will be probably said, that

that the systems of quarantine, against which I am here inveighing, have (notwithstanding my charges of error and superstition) had the happy effect of preserving Europe from the Asiatic pestilence. Were this indeed the case, my arguments against them could have but little weight. The assertion, however, is wholly unfounded; they never protected a single individual, much less a whole country, from this horrible disease. For nearly two centuries after the establishment of these systems, the south of Europe was visited by pestilence, as frequently as it had ever been before. Its exemption from that calamity, in latter times, has been owing to causes that have no connexion with lazarettoes and quarantines. These causes consist in the agricultural improvements which have drained and dried up offensive marshes and large bodies of stagnant water, in the introduction of forms of police, enforcing greater cleanliness and purity in large commercial cities, and in a radical change in the customs and modes of living of the inhabitants. In other words, they consist in the removal of extensive sources of septic exhalations, in higher degrees of personal and domestic cleanliness, and in the adoption of a diet and mode of life, better suited to the nature of the climate, and the constitution of the people. Let Italy and other countries of the south of Europe be reduced to the half-cultivated state in which they were during the fifteenth, sixteenth, and seventeenth centuries, and they will again, notwithstanding their quarantines and lazarettoes, be subject as before, to pestilential epidemics. On the other hand, let even the countries of Asia be put under a proper state of agricultural improvement, let their cities become subject to a wise and well executed police, and let their inhabitants live in a manner accommodated to the climate, paying in particular, a due regard to personal and domestic cleanliness, and pestilence will cease to be the perpetual opprobrium and scourge of the East; for there is no country on earth so abandoned by nature to inevitable calamity, as to be *necessarily* subject to that disease.

Very early in the eighteenth century, the pestilence had been slightly epidemic in several of the countries of Europe. At length, in the year 1720, it broke out in Marseilles, where it prevailed for a time with unbridled rage and great mortality. Believing the disease to be highly contagious, Great Britain began to tremble for her safety. Accordingly, the eye of the British ministry became eager in search of means to avert from the nation the im-

pending evil. In this state of apprehension and anxiety, application was made to Dr. Meade, physician to Geo. II. who, if not the most able, was at least the most popular physician of the kingdom. This favourite of the court was requested to furnish a system of rules and regulations to prevent the introduction of a disease which was committing such ravages in the south of France.

In complying, or rather in attempting to comply with this request, Dr. Meade had nothing but his knowledge of books to direct him. He had had no personal experience in pestilential diseases, and could, therefore, do nothing else than simply tread in the footsteps of his predecessors. We accordingly find him immersed in most of the weaknesses and errors, and even in some of the wild extravagancies of the dark ages. He did not indeed contend, that pestilence was an engine of vengeance launched immediately from the hand of the Deity; he considered it as an evil of terrestrial origin. But he was firmly of opinion that it had been always generated in the sultry climates of the East, and introduced from thence into Europe by means of contagion. Respecting the virulence and activity of this contagion, he relates several stories too gross and extravagant even for the ear of credulity itself. It would be unpardonable, therefore, to offend your ears by a repetition of them.

As to Dr. Meade's practical rules and directions on the subject of quarantine, he candidly acknowledges that they are derived entirely from the practices long pursued in the south of Europe. He does not even attempt the suggestion of a single improvement as to the mode of preventing the introduction of pestilence from foreign places. He has indeed left both the business of quarantine and the doctrine of contagion precisely as he found them, except that he impressed the errors which he had himself imbibed respecting them more deeply than before on the minds of his countrymen. For, possessed, as he was, of eloquence, ingenuity, and address, and sanctioned in his efforts by national and royal patronage, he spoke and wrote with the weight of an oracle. Such was for a time his ascendancy over the public mind, that it was deemed a kind of medical heresy to dissent from his opinions. I fear, that even at the present day, the sentiments of Dr. Meade, respecting pestilential contagion, have a secret yet powerful influence over the minds of many physicians, both in England and the United States. Had he never written on contagion and quarantines, error on these subjects would never have

been

been able to boast such a widely extended and such a protracted reign.

From the time of Dr. Meade, till within the last thirteen years, but little attention was bestowed upon the business of quarantines. The cities of Europe remained free from pestilence, and no event took place to bring the subject into notice. In consequence of this, the principles and practices long established in these institutions, continued in use without question and without alteration. Lazarettoes and systems of quarantine were the only institutions bearing any relation to science, which had been handed down from the fifteenth to the eighteenth century, without having undergone either revision or amendment. They were still, therefore, deeply tinctured with the superstition and semi-barbarism of the age in which they were founded.

It came at length to the turn of the United States to figure in the great drama of contagion and quarantine. Her part was a tragical one; and it must be confessed, that she has performed it with such effect as to overwhelm both science and humanity in tears.

The pestilence appeared first in the city of New-York, in the year 1792. But as it was confined within narrow limits, and produced but little mortality, it did not become an object of much public notice or solicitude. In the year 1793, the same disease, but very different in violence and malignity, broke out and raged in the city of Philadelphia. The sudden and great mortality which it occasioned, and the unprecedented rapidity with which it spread among the inhabitants, struck both the city and the country with the utmost consternation. Even the most distant parts of the United States, seemed at first to tremble for their safety. The disease was admitted by every one to be highly contagious, and was very generally believed to have been introduced into Philadelphia by a sickly vessel from the island of St. Domingo. This belief, which, without the slightest examination into circumstances, was hastily adopted, and propagated with a kind of apostolic zeal, has proved a source of the most grievous misfortune to the commerce and prosperity of our city.

To the honour of our country, however, this opinion was not universal. When the pestilence appeared in Philadelphia in the year 1793, Dr. Rush, supported by a few other physicians, boldly declared it to have originated from local and domestic causes. But, like the still, small whispers of conscience amid the boisterous uproar of the passions, the voice of these interpreters of Nature was drowned

drowned at the time by the loud and general cry of "*importation from abroad!*" Accordingly, systems of quarantine, founded on a presumption of such importation, were soon afterwards established at Philadelphia, New-York, Baltimore, and other commercial cities of the Union. They were directed particularly against vessels arriving from the West-India islands, which were regarded, if not as the birth-place, at least as the nursery of the evil which such systems were intended to prevent. These establishments were nothing more than mere copies of similar institutions in the old world. Indeed, as they were erected in great haste, and under the direction of men who had never before reflected on the subject, they could not be expected to assume an improved form. Nothing in their organization bespoke either the superintendance of sound reason, or an acquaintance with nature. They appeared in all their departments to be the offspring of mere chance, or of something more systematically erroneous. Directed exclusively against *contagion*, supposed to be in some way attached to vessels arriving from tropical climates, they paid at first no regard to the real *cleanliness* of the vessels themselves. Filth of every description appeared to be regarded by their framers as an innocent article. This was more particularly the case with respect to the system of quarantine established in the port of Philadelphia.

The insufficiency of these establishments for answering the end proposed, was soon discovered in every quarter. Notwithstanding the strictness with which the measures they enjoined were executed, the pestilence appeared repeatedly in most of our large commercial cities, as well as in various inland places. This produced frequent changes and modifications in our systems of quarantine, which it would be alike impracticable and useless to specify. They had all the appearance of mere experiments, made by undiscerning men, without any established principles to direct them. Unfortunately for the importers of pestilence, the result of each succeeding experiment proved alike unfavourable to their opinions and expectations. Notwithstanding this, the establishment was still kept up, and the confidence of many in the efficacy of quarantines remained unshaken. The perpetual cry of these characters was, "Let our quarantines be so strict and rigid in principle, and so faithfully executed, as to suspend all intercourse with the West Indies and other tropical climates, during the summer and autumnal months, and the calamity of pestilence will cease to afflict us."

But

But I perceive, Gentlemen, that I have already trespassed too much on your time. I will, therefore, pursue the history of quarantines no further. I flatter myself I have dwelt on the subject sufficiently at large, to give you a view of its most prominent features. I have already stated to you, and I beg leave to repeat it, that the practice of quarantines commenced during the dark ages, when Europe was a stranger to physical science; that it appears to have owed its origin, in a great measure, to a superstitious abhorrence entertained towards the infidels of the East; and that it has been continued down to the present day, without any material alteration or improvement. While other practices and institutions of similar date have been either abolished or amended, in consequence of the light shed on their principles, by the advancement of science in modern times, this alone has been suffered to remain immersed in its primitive darkness, and surrounded by all its original errors.

What have been the effects of quarantines on the interest and prosperity of the United States? Have they, in a single instance, been instrumental in protecting any one of our sea-ports from the ravages of pestilence? We owe it to truth and independence of sentiment, we owe it to our country, to assert that they have not. Those commercial cities, in which no quarantines have existed, or in which they have been so light as to exist only in name, have been as free from pestilence as others where they have been practised in their utmost rigour. Of the truth of this, Philadelphia furnishes a melancholy example. For twelve years past has her commerce languished under the weight of the fetters of quarantine, while that of other principal cities of the Union has been comparatively free. Yet has she not, from this state of severe and oppressive restraint, derived the shadow of advantage on the score of health. With the single exception of New-York, which has experienced equal calamities, she has been by far the greatest sufferer in the Union from pestilential visitations. Her citizens have suffered incalculably in their fortunes, without being rewarded by any equivalent in the security of their persons. A few years ago, Philadelphia stood proudly pre-eminent on the scale of commerce. But what is now her humiliated state? Stripped of her ancient and well earned pre-eminence, she beholds herself sunk to a secondary rank, and that by the sole operation of an unwise and destructive quarantine.

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But, though Philadelphia has been most deeply affected in her interests, yet the commerce of the United States at large has suffered severely from systems of quarantine. We have declared, as a people, by our public acts and public writings, that our pestilential epidemics are highly contagious, and capable of being conveyed from country to country. The nations of Europe have taken us at our word, and assumed, with respect to us, a defensive attitude. During certain months in the year, our vessels are prevented from entering their ports, except after the performance of an oppressive quarantine.

For this evil we are indebted entirely to our own ignorance and indiscretion. We are ourselves the cause of our being regarded abroad as an infected people, with whom, at certain seasons, it is dangerous to hold an immediate intercourse. In the West-Indies as well as in the tropical parts of South America, the inhabitants are subject to pestilential diseases precisely such as we experience. Yet neither in England, France, Spain, Portugal, nor Italy, are vessels from those burning and sickly regions subject to quarantine. Ever since the discoveries of Columbus have such vessels been admitted into the ports of those countries, without restraint, and without even the suspicion of introducing contagion.

Whence, then, arise those rigorous measures of quarantine, which are pointed exclusively against vessels from the United States? Why are vessels from the West-Indies and the tropical section of Spanish America suffered to enter the ports of Europe without molestation, while ours are prohibited under the heaviest penalty? The answer to this is obvious and easy.

The inhabitants of the West-Indies and of South America declare unanimously, that the pestilential diseases of those regions are not contagious, and, therefore, not capable of being transported to the mother country. We, on the other hand, declare the reverse to be true, with regard to the pestilence which has prevailed in our commercial cities. The governments of Europe, giving full credit to both our assertions, and framing their measures accordingly, very consistently subject to quarantine, at certain times, all vessels arriving from the United States, while those from the West-Indies and South America are suffered to pass without detention. Had we not, with an equal want of truth and of wisdom, attributed to the pestilence of our country a quality which it certainly does not possess (I mean contagion) whatever our sufferings

might

might have been from it at home, they would not have been doubled by extending to our commerce in foreign places. On the other hand, should the inhabitants of the West-Indies, even at this time, pronounce their febrile diseases to be contagious, there can be no doubt but the nations of Europe would take the alarm, and include in their measures of quarantine all vessels from those regions. Such are the consequences which every people must expect, who proclaim their country to be a nursery of contagion.

When compared with each other, the practices of quarantine in Europe and in the United States, exhibit a strange and ludicrous inconsistency; an inconsistency disgraceful to nations which call themselves enlightened. Thus, in the United States, we subject to quarantine, vessels arriving from the West-Indies, pronouncing our own country free from pestilence, unless when introduced from that quarter. In Europe, on the other hand, all vessels from the West-Indies are exempt from quarantine, while those from the United States are compelled to submit to it. In other words, we declare the West-Indies to be the genuine birth-place of pestilential contagion, which gains admission into our own country only through the channels of commerce. But the nations of Europe deny this, attaching the opprobrium of contagion exclusively to the United States, and contending that the West-Indies are free from it. Such inconsistencies in practice bespeak a radical error in principle.

But we have, hitherto, dwelt only on the dark and cheerless side of our subject. Let us, for a moment, direct our views to that quarter of it, where a more bright and pleasing prospect invites us; that quarter, where the dawn of a new era, in medical science, has already unbarred its ruddy portals. On the front of these portals, behold inscribed, in shining letters, the sublime and prophetic effusion of the poet.

"*Magnus ab integro sæclorum nascitur ordo.*"

A new series of events is about to commence their brilliant course.

Yes, Gentlemen, as far as relates to pestilential diseases, a new series of events is, indeed, about to commence; I should rather say, it has already commenced, and is destined to abolish the doctrine of pestilential contagion, and with it all pest-houses, and systems of quarantine throughout the world. Let it be our pride to remember, that this

this series first began its course among ourselves, and is now forcing its way through the nations of Europe. It is several years since all the most enlightened physicians of the United States rejected the doctrine of contagion, as far as relates to the pestilence of our own country. These characters contended of course, that this disease was not, and could not be, imported from abroad, and that, therefore, systems of quarantine for its prevention were useless establishments. This opinion has found its way into the South of Europe, and has been ably supported, as applicable to the pestilential diseases which have lately prevailed in that quarter. The most enlightened physicians of Spain and Italy have contended and proved, that these diseases were neither contagious nor imported from abroad, and that, therefore, systems of quarantine were useless and nugatory, as means of prevention.

But it may be asked, shall there, then, be no quarantine establishments in the United States? and shall all vessels from tropical climates, whether healthy or not, be suffered at all seasons of the year to enter our ports immediately on their arrival? I answer, let the detention of quarantine be entirely abolished, and the process of simple *purification* substituted in its stead. This process consists solely in washing and ventilating vessels, and may be completed in three days as well as in forty. All vessels, after long voyages, whether sickly or not, and from whatever place or climate they may have come, ought, during warm weather, to be compelled to undergo this necessary purification, previously to their admission into any of our ports. Such a measure is not too rigid for commerce to bear, and it is all that the public safety requires.

But it is not alone with regard to the pestilential diseases of Europe and America, that the doctrine of contagion is falling into disrepute. The same enlightened sentiment begins to prevail relative to the plague of Asia and Egypt.

It is six years since I had the honour, in this hall, of addressing your predecessors in our society, on the analogies between the pestilence of the East and the yellow fever or pestilence of the West. I contended at that time, though in opposition to an unbroken host of prejudices, that *neither* of these forms of disease is contagious. And I now with sincerity assure you, that as my years accumulate and my observation extends, my conviction of the truth of this opinion increases in strength. But, what is still more consolatory and encouraging, I have the happiness to find, that the same opinion (which is becoming popular in

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some parts of the United States) is also advocated by many distinguished characters in other countries.

In contemplating this particular head of our subject, we find reason to rejoice, that even war itself is not at all times an unqualified evil. Amidst its varied and destructive operations, some good occasionally breaks forth, to make partial amends for its horrors and calamities. The armies, on their return from the holy wars, during the dark ages, are known to have brought with them from the countries of the East, the semina of those arts and sciences, which have since taken root, and enlightened and aggrandized the nations of Europe. In like manner, the late French and English expedition into Egypt has been the cause of diffusing through Europe and America much valuable information relative to the oriental pestilence. The ablest of the physicians and philosophers who attended the respective armies on that occasion, have ascertained, and proved in their writings, that this disease is not contagious. They have clearly shown it to be nothing but the endemic of the eastern climates, depending for its origin and existence on local causes, and wholly incapable of being conveyed and propagated in distant countries. As soon as this sentiment shall become general among the nations of Europe, (and, being true, it must become general) their systems of quarantine for the prevention of the Asiatic pestilence will be regarded as useless, a sure precursor of their final demolition. Indeed, if we carefully examine the writings of Bruce, Volney, Sonnini, Antes, and other travellers, they cannot fail to convince us, in opposition to the avowed sentiments of their authors, that the plague of Egypt and Asia is not contagious. Even the treatise of Russel himself, the great apostle of contagion, contains facts sufficient to refute his own doctrine.

If, then, Gentlemen, such is the nature and such the tendency of systems of quarantine; if these systems are indeed founded in error and superstition, and productive only of mischief, you are called on by your love of truth, and by that spirit of patriotism, which it is, no doubt, your delight, as it is certainly your duty to cherish, to aid in the demolition of those of the United States. It is known to you that the quarantine establishments of our country are bottomed on special laws enacted for the purpose. While these laws continue in force, it would be criminal to impede their operation or frustrate their intention. They spring, however, like all others,

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out of the general sentiment and will of the people. To strike effectually at the root of the evil, this sentiment, which is now erroneous, must be corrected, and this will, which is now misguided, must be made to assume a proper direction. In other words, the people must be made to think correctly on the subject of quarantines, and a repeal of the laws on which these institutions are founded will be the immediate consequence. To you, Gentlemen, I beg leave to repeat, this work of reform in the public sentiment must be, in part, entrusted. Your influence in society, on this subject, will be extensive and weighty. On precisely the same scale then will be your duty to act. Let it be your constant endeavour to use this influence in such a way, as to convince your fellow-citizens, that the pestilence of our country is neither imported from abroad nor contagious in its nature, and that, therefore, our quarantine establishments, intended for its prevention, are useless and oppressive. This service, not only your country in particular, but your contemporaries at large, have a right to expect from you, and posterity will regard your memory according as you perform it.

I should be wanting in respect for the interesting occasion on which we are convened, were I to part from you without tendering you my sincere congratulations on the uncommonly flourishing state of our Society. The clouds of schism, which hung over it of late, and the breath of adversity, which threatened to blast it, have only served to renovate its vigour. On these temporary evils it may now look back with emotions of triumph. Intimately connected as it is with the University of Pennsylvania, possessing funds that will shortly be sufficient for all its purposes, and firmly rooted, as to its welfare, in the affections of its members throughout the Union, it may be confidently said to have but little to wish, and nothing to fear. Nor can it fail, with such advantages, and under proper management, to attain and preserve an elevated rank among the medical associations of the age. Let these considerations inspire its friends with higher zeal, and invigorate their efforts for its support and promotion. And let me hope, Gentlemen, that each of you will be prepared to reciprocate the sentiment, with sincerity and becoming fervour, when I say of our society, "*Esto perpetua!*

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

ON Sunday, January 25, at twelve o'clock at night, a messenger came to me, to go to Turnchapel, in this neighbourhood, to render surgical assistance to a man who had met with a dreadful accident. On my arrival I understood he was a foreigner, a Calmuc Tartar, called Saphora, belonging to a Russian vessel the property of Signor Nicholas Panteli, then lying in the dock which belongs to Isaac Blackburne, Esq.; that he had been at a public-house, drinking with his companions, and had drank to such a degree as to produce the most complete intoxication. On his attempting to return on board, he passed over the planks laid from the edge of the dock to the ship's side; but in catching hold of a rope to ascend the ladder, he unfortunately fell backward, and was precipitated to a depth of thirty feet. In his fall, his head came in contact with a sort of step, of which there are several projecting from the sides of a dock, and are, I believe, technically called Altars. He was immediately taken up, and brought into his birth, in a state of perfect insensibility; indeed, even with scarcely any appearance of life. Whilst they were getting him up, he vomited repeatedly, and very copiously.

I found him stretched on a kind of bed, with every external appearance of an inanimate corpse, totally insensible to any question I put to him, with a pulse not to be distinguished; the tout ensemble strongly impressing my mind with the idea, that he had ceased to exist, and beyond the reach of any surgical assistance whatever. Too full of this belief, I was just ready to make a prognostic o that effect, when I was as suddenly struck with the propriety of a still more accurate examination. Often does it happen, that patients are pronounced to be without hope, and abandoned to their fate; indeed, the dreadful fiat, to a certainty, sometimes takes place, more from unafforded assistance than the violence of injury. I cannot help enforcing to the younger and inexperienced part of the profession, the absolute necessity, nay, the imperious call of humanity, never to abandon a patient to his fate, however dreadful the injury, however great may be the destruction of the organic system, or however the patient may be re-

duced by the action of disease; but let him consider, *Latet scintillula forsan.* The vis medicatrix naturæ of the older schools, or in whatever point of view such a principle may be understood in the modern, daily brings to our view such extraordinary facts as appear little short of the miraculous; whilst this vital principle has been known to overcome obstacles thrown in its way by the hand of officious ignorance. It has been very properly remarked,

Naturam expellas furcâ tamen usque recurret.

To return. On my requesting the people near him to turn him round, this slight motion caused instantly a copious vomiting, which though it showed that life had not entirely left him, yet pointed out that the system was most materially deranged. I soon found a most extensive laceration of the scalp; the occipito frontalis muscle was divided in a jagged manner, from where it becomes broad and tendinous, on the superior part of the cranium, down to its insertion into the orbicularis palpebrarum; this part was also completely denuded of its pericranium. On a still further examination, there appeared a fracture (of that description which has obtained the denomination of fissure) of the os frontis, extending from the sutura coronalis to the inferior portion of this bone, where it becomes the orbitar process, on the left side of the cranium. This fracture took an irregular zig-zag direction; it included both the lamellæ or tables of the cranium, there being an evident bloody secretion or discharge from the fissure, arising from the diploë, but which was rendered more certain by applying alternate pressure on each side of the fracture, where there was an evident elevation and depression of the bones, arising from the complete separation of both lamellæ. There was felt a considerable tumour at that part of the face where the levator labii superioris arises from the orbitar process of the superior maxillary bone.

The left clavicle was fractured near its articulation with the sternum. The third and fourth ribs were fractured, apparently, where the lesser pectoral muscle is inserted. The injury done to the pulmonary system was evident from the appearance of a widely diffused emphysema (of the propriety of this term I am not fully persuaded, though it is often used by Linnæus, Sauvagesius, &c.) over all that side of the thorax, marked by that peculiar crepitus which is evident to the ear as well as touch, plainly discovering that the spiculated point of the fractured rib had completely perforated the pleura, and entered the lungs.

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The muscles of the right fore-arm, on its inside, where they are covered by the aponeurotic expansion of the biceps, were much swollen, but there was no fracture either of the radius or ulna. An ecchymosis extended over the course of the Glutei muscles. A very careful examination convinced me that there was no depression of the fractured bone of the cranium, nor did I remark or suppose there were any evident symptoms of compression. It is generally understood that vomiting is an infallible sign of a compressed brain; but I have remarked, in several cases, that, like other dogmas, it is not without exception. I was aware, that the sinus which lays immediately in the inferior portion of the frontal bone, might be exposed to considerable injury, yet there was no symptom whatever absolutely indicative of extravasation of any kind, producing compression; consequently, I saw no necessity for the operation of the trephine, as I certainly consider it unnecessary where there are no symptoms sufficiently strong-marked to require its use.

After weighing carefully in my mind all the circumstances of this case, I was led to make this induction, that the man was *in articulo mortis,* and all assistance I could render him would be of no avail; still, I was determined to use every exertion in my power, whatever might be eventually the termination. I brought the lacerated, irregular edges of the scalp into contact, and retained them in that situation by the means of five sutures, and having spread the ungt. ceræ on some lint, applied it to the part affected, which was confined by a proper bandage, and over all a night-cap, as the best general mean of confining dressings, &c. to all wounds of the head. The fracture of the clavicle was reduced, and the necessary bandage applied. A broad roller was passed several times round the chest, &c. to prevent that distressing uneasiness which frequently arises from fractures of these bones during respiration, without this necessary precaution.

Bleeding has been, in general, considered injurious in cases of a concussion of the brain, as it has been said to produce sudden debility. However advisable it may be to follow general rules, yet in the sciences of medicine and surgery, deviations are often absolutely necessary, showing the too frequent inutility of classifications, and of too close an adherence to the systems of the Schools.

There were present in this case, general signs of a concussion of the sensorium; a largely dilated pupil, which had lost its contractile powers on opening the eye-lids to

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the admission of an extraordinary degree of light; whilst the respiratory organs were not affected with laborious action, as is often the case in a state of compression, but performed their office in a slow, yet almost imperceptible manner. I considered it necessary to attempt to bleed him, and made a considerable large orifice, but scarcely a drop of blood followed the lancet. I enlarged the orifice, but to no purpose. This did not tend to diminish my apprehensions for the event.

I directed, that in case of his surviving, he should be kept as quiet as possible; should take no solid nutriment whatever, but drink an infusion of balm, or water-gruel; and above every thing, to admit no stimulus from light, particularly that of a candle. I then left him, strongly prepossessed with the idea that his existence would be but for a very short time.

26th. On my arrival this morning, to my great surprise, I found him still living. He lay in a comatose state the whole of last night; his pulse was perceptible, yet unusually slow; the respiration enfeebled, and at long intervals. On my stimulating the system, purposely to try its effect on the sensorium, he gave some signs of returning sensation. I directed him to be still kept perfectly quiet, to continue the same diluting liquids, and gave him a solution of magnesia vitriolata. It may not be improper to remark, that I have found this medicine peculiarly efficacious in stomachic irritability, where every thing has been instantly ejected; in small doses, it has taken off this irritation: In two cases, where it was absolutely necessary the stomach should retain a certain laxative medicine, it was only effected by its combination with ℥jß of the vitriolated magnesia. The dressings to his head to remain as at first applied.

27th. He passed a night without any sleep; appearances are more favourable; pulse and respiration becoming now more natural. The laxative medicine operated well. To continue his diluting liquids; as I had greatly to apprehend the re-action of the system, which might proceed to such a length, as to produce inflammation and a train or subsequent distressing circumstances.

28th. This morning every symptom more favorable; no sleep last night, but he was enabled in some measure, to explain his feelings; he complained most severely of an unextinguishable thirst, and a most distressing degree of pervigilium. The former symptoms, I have before remarked, in an evident concussion of the brain, and to as great a degree; but as I am at a loss to explain the cause

I shall

I shall not attempt it. To endeavour to overcome this morbid propensity, his drink was occasionally acidulated.

To day I examined the state of the scalp, and found it almost entirely healed by that desirable process, the first intention, except in two small parts; the one at the internal canthus, the other near where the corrugator supercilii muscle is inserted into a portion of the frontalis, and rather extending to the superciliary ridge; here the pus was of a most healthy appearance. The eye was uninjured, as he could discover minute objects as well as ever. A pledget, spread with the ungt. ceræ, was again applied; I gave him this evening the tinct. opii. gtt. xxx. and permitted him to eat a little soft crumb of bread with his water gruel; bowels regular as to evacuations.

29th. The pervigilium and thirst still tormented him to an almost insufferable degree; in other respects every symptom tending to amendment. The other injured parts of his body gave him but little uneasiness; he now complained of very violent pain at the hind part of the head, between the occiput and the second vertebra of the neck; no doubt, from the great injury and consequent violent stretching of the ligaments which connect the *processus dentatus* of the second vertebra to the occipital bone; it was increased to a very violent degree, particularly by the least rotatory motion. I increased the dose of the tinct opii. to gtt. L.; care being taken to preserve a regularity of intestinal evacuation by the use of the vitriolated magnesia.

30th. The thirst and watchfulness still his great sources of complaint; in other respects much better. The scalp nearly quite healed; the ligatures sloughing away; he is to take food a little more nutritious, but with the greatest caution as to quality or quantity. As the opium produced no sort of uneasiness or bad effect, I judged it proper to increase the dose to gtt. lx.

31st. Had a little sleep last night; his thirst was not so great; the ligatures all came away; the bowels too constipated. To take the saline solution, as before, according to circumstances. The pain at the back part of the neck gives him still greater uneasiness, yet unattended with tension, or any sort of particular local appearance.

To increase carefully his sustenance.

Feb. 1st. Gradually proceeding to convalescence; the scalp perfectly healed; he is able to sit up in his bed; slept a little last night without his opium.

From this time his recovery was rapid, and on the 6th he was sufficiently well to follow me from his birth to the

 captain's

captain's cabin, being the twelfth day from his receiving the injury. It is to be remarked, that he felt some pain in his neck a few days beyond this period; but it then entirely left him, and he has since been able to do his duty as a seaman, in every respect, without the slightest inconvenience.

I think this case should carry that degree of conviction with it, never to abandon a patient, though he may be in extremes; and that as long as life exists, hopes should still encourage us. It also proves the strength of the *vis vitæ*, or of Nature, in her struggles to overcome the effects of disease; these efforts are in no instances, more visible than in injuries received from external violence, as passing immediately under the cognizance of the more sensible faculties; not but the activity of the constitution is equally exerted in subduing the malignancy of contagion, but here the *nisus* is more obscure, and consequently less observed.

That Nature is to be implicitly followed, is what I would by no means infer; she has her *ne plus ultra*, and very often requires the assistance of art; as, for instance, in that soft and spongy kind of granulation, the Υπερσαρκωσις of ulcers, which frequently demands the repeated application of powerful escharotics. Again, we have many, too many fatal instances, where Nature as soon carries on the process of suppuration in the lungs to the certain destruction of the unhappy sufferer, as she would in the cellular membrane of an extremity, without any hazard to the constitution. Yet the absolute uncertainty of forming a true prognosis, as to the event of accidents, requiring the interposition of surgery, is a true but lamentable fact, as I have elsewhere remarked. As decided proofs, I would at this time briefly observe, that some years since I was concerned in a case, where a man, from a slight cut in his hand, was seized with tetanus, which killed him; whilst, very lately, another had his finger nearly divided, with loss of substance and exposure of the joint, who was perfectly cured. A man, from a lacerated wound in the extremity, died a few days after; whilst another, with a wound in the same part, extending half its circumference, with a protrusion of the tibia, to the extent of three inches, has perfectly recovered.

The most acute powers of discrimination are necessary to enable us to form any kind of judgment in those cases: we should ever recollect, that there are undoubtedly many

excellent

excellent rules laid down by systematic writers, to direct it; but, above all, we should have particular regard,

1st. To the season of the year.

2d. Whether a proper and continued attention can be paid, during the necessary confinement.

3d. The situation, &c. of the injury.

4th. Whether inflicted by a sharp instrument, or crushed by a heavy compressing power.

5th. The age of the patient.

6th. Though last, by no means the least, the predisposition to disease, or, in plain terms, the habit of body.

I am, &c.

Plymstock, June 10, 1807. ROBERT SCAMMELL.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Communicate the following Case of Tic Douloureux, in hopes that the treatment pursued on this occasion may prove equally successful in other similar cases. The cicuta, which so readily succeeded in this instance, as well as in others, although frequently administered in such complaints, is sometimes given too sparingly to effect a cure.

Mr. Shoubridge, of Old Bond Street, was troubled with a painful affection of the face twelve or fourteen years.—The disorder has been rather hereditary in his family; which induced him almost to despair of finding a remedy. At first he attributed it to his teeth; in consequence of which, he submitted to the extraction of all those which were decayed, but without obtaining any permanent relief.

For the space of two years previous to his applying to me on this account, he had generally the most excruciating torture after every meal; insomuch as sometimes to make him faint, and fall out of his chair. It occasionally lasted an hour or two, attended with alternate exacerbations and remissions, like a spasmodic disease. When the pain was most violent, it was of the lancinating kind.

A few months before, he had been under my care, in consequence of his rupturing the tendon of the rectus muscle; and the necessary confinement to his bed, by depriving him of the advantage of exercise, aggravated his complaint.

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He had tried various remedies, but in vain.—I first gave him cicuta in small doses; directing him to increase them gradually; but not receiving any immediate benefit, he soon discontinued its use. He had heard of cures performed in such maladies, by the division of the nerves; and was anxious to have such an operation performed; but as the pain was in the lower jaw, I told him it was impracticable to perform it, with any hope of success. He was, however, impatient; and, with my consent, consulted an eminent surgeon, who coincided in opinion with me.

This gentleman advised him to take ten drops of the arsenical solution every six hours; increasing the dose gradually to fifteen; but in the course of a few days, his bowels were so much disordered by ten drops, that I advised him to discontinue it. He then promised to give a fair trial to any medicine which I should recommend. I accordingly gave him the cicuta; directing him to take two pills every morning and noon, and four at bed-time; and to increase the dose as far as he could conveniently bear.

This plan had the desired effect. Within a few days his pain was much alleviated; and in a fortnight perfectly removed. More than two years have now elapsed; yet he has never had the slightest return of it, from that period to the present hour.

I have known this medicine prove equally efficacious in other instances; but only one in which the complaint was so violent, as in that of Mr. Shoubridge. In his case, the cicuta was increased to five scruples a-day; in the other to seven.

Since the preceding case was drawn up, your Journal for June has appeared; in which are some errors of the press, which I beg the favour of you to correct. P. 543, l. 16, for began, r. begun. Table of contents, and superscription of p. 540, &c. for Mr. Anderson, r. Dr. Anderson.

These are not the only errors committed in the last Number of your Journal. A false alarm is there sounded by a Mr. Golding, of Reading; and I rather wonder, that the vigilance of the editors permitted it to pass unnoticed. This gentleman is an additional proof of the justice of Dr. Jenner's observation, that *it is surprising how many people write on this subject; and how few understand it.*

Mr. Golding says, he by no means *wishes* to be considered as an anti-vaccinist; and indeed, it is no very desirable

ble character; when we consider, with what sort of persons he would be ranked, if he were to be considered in that light.

Mr. Golding says, the cow-pock in all the five patients whom he vaccinated, went through the regular stages; yet he afterwards tells us, he has this circumstance to mention, concerning one of them, namely, that of Eliza, "after the disease had gone through its regular stages, and the habit had been affected, the part where the matter had been inserted, degenerated into what Dr. Jenner calls erysipelatous inflammation; the wound became deeper and larger, and a secondary constitutional affection was produced. Hence it appears, that the disease did not go through its regular progress, as Mr. Golding asserts; but either was interrupted in its course, or was never of the genuine kind.

Mr. Golding says, he has never heard or read of the secondary indisposition destroying the previous constitutional affection. So absurd an hypothesis, as that of a subsequent disorder destroying the security imparted by the preceding, it is probable never entered the mind of but one man. Had Mr. Golding, however, heard any thing, or read any thing, about the cow-pock, it is probable he would have known, that many instances of the small-pox, either in a perfect or a partial degree, have occurred, in those cases where the cow-pock has been interrupted in its progress, and that nothing less is required by its advocates, than that the process of exsiccation and scabbing, as well as that of vesication, should be regular and complete. In proof of this, the Jennerian Society, as well as other acknowledged judges of the practice, require that where there is any considerable deviation from the ordinary course of the cow-pock, the patient should be vaccinated again.

As to the formidable train of symptoms with which Eliza was affected, it is totally unnecessary to say a single word more about them; since Mr. Golding himself is of opinion, that they proceeded from the quinsey, and not from the small-pox. Charity, therefore, must induce us to suppose, that although these formidable symptoms in Eliza, add a little shade to the picture, they were pourtrayed, only to maintain the fidelity of the narrative, and not for the sake of blackening the character of vaccination.

It is much to be regretted, that Mr. Golding did not revaccinate this subject, either after the cessation of the erysipelatous affection, or previously to his putting her to the

test

test of variolous inoculation. Even those who, after the promulgation of Mr. Goldson's opinion, propagated the loudest alarm, now allow, that the vaccine test is as efficacious as the variolous; and we all know that it is much more safe. At any rate, no persons should be subjected to the test of variolation, till they are armed with all the security which vaccination can afford.

The more we scrutinize Mr. Golding's communication, the more we discover, how utterly unacquainted he is with that branch of the healing art, on which he has thought proper to take up his pen. You have expressed your intention of discontinuing, or at least abridging, discussions of this kind; but from the specimen now before us, of persevering ignorance, after what has been done to inform the public mind, you may possibly be induced to consider such a resolution premature.

As one instance of Mr. Golding's ignorance of this subject, in addition to the former, he takes care to let us know, that a local pustule was excited by the variolous test in another of his patients; but he does not guard his readers from error, by informing them, that a similar pustule may in some instances be excited, in a person who has had the small-pox. Dr. Valentin, Mr. Fewster, and many other authors, relate cases of this sort; in which matter taken from such local pustules, in the secondary small-pox, has infected others by inoculation, and communicated the genuine disease.

Dr. Jenner mentions an instance of the kind, on the authority of a late professor at Edinburgh; in which a great inoculator for the small-pox used to carry the matter for infection in his own arm. This anecdote has been confirmed to me by Mr. Jones, an eminent medical practitioner, of Mount Street; who tells me, that the inoculator here alluded to was Mr. Thomas Sutton; and that he heard the same anecdote from his own mouth.

Mr. Kite, late of Gravesend, informed me, that he had inoculated himself for the small-pox, many years after he had had the disorder; and produced matter, which he had sent to Dr. Mitchell of Chatham; and that this matter had proved effectual in subsequent inoculations. I trust, therefore, we shall hear no more of such inoculations; which, whether they are intended to spread an alarm or not, have frequently had that effect, particularly in the Portsmouth cases, the Woolwich cases, and the Harrow cases. These have

have all, in their turn, served as so many bugbears, to frighten the public out of their senses, and to deter them from vaccination; and have all been exploded. The local variolous pustule, when excited after vaccination, has therefore had its day; and can no longer impose upon the intelligent part of the community; but it may certainly still prove sufficient to spread a false alarm, and create a popular delusion.

I now beg leave to refute some other cases, brought forward by Dr. Rowley.—The 146th case, in the 2nd edition of his book, is that of Mr. Perceval. The Doctor tells us, that this gentleman is *now living at Gosport*; that he was vaccinated at the Small-pox Hospital four years ago, and *died of the small-pox the same year.*

Nos. 186 and 187, the child of John Lea, and that of John Mason, vaccinated by me. Dr. Rowley says these children had the small-pox. Dr. Willan, on the contrary, in a letter now in my possession, declares, that it was the chicken-pox; and that if he ever saw it more distinctly marked in one instance than in any other, it was in the present. Many respectable practitioners were of the same opinion, particularly Dr. Hooper.

No. 192, the child of Mr. Guinigo. Dr. Rowley says this child was vaccinated by me. This is a mistake; and furnishes one instance of the facility with which Dr. Rowley, and the other enemies of vaccination have admitted reports unfavourable to the practice. Mrs. Curling, of George Street, Portland Chapel, whose child was the subject of another erroneous report, acknowledged to me, that she had communicated this case to Dr. Rowley, in return for some supposed professional services. Dr. Rowley recorded it, as reported by Mrs. Curling, without inquiring into it.

The fact is, that the child was vaccinated, not by me, but by Dr. Thornton, about three years before the occurrence of the pustules which gave rise to this report. A younger child then had the confluent small-pox; and the other, who was dropsical, and perfectly helpless, lay on the same bed. The mother attended them, and alternately handled them; in consequence of which, the child in question had eleven pustules. His mother was of opinion, that he was rather more indisposed at the time of their appearance.

pearance. This is not improbable; but it may reasonably be doubted whether this was a consequence, or a mere coincidence, as she confesses he had been given over some time.

A very partial and unfair representation has been given of the case of Mrs. Curling's own child, by Dr. Moseley and Dr. Rowley. Dr. Moseley pretended, that the child had had the small-pox after vaccination. In my pamphlet in answer to him, I proved that this charge was totally destitute of foundation. Mr. Merriman also proved the same, both in his pamphlet and in the Gentleman's Magazine; nevertheless, Dr. Rowley afterwards inserted the case in his list of failures, as if it had never been refuted. This is the way in which the antivaccinists multiply their cases. Another is by relating the same case twice; of which, many instances may be found in Dr. Rowley's publication.

Dr. Moseley says, Curling's child had ulcerations about his body, and was otherwise much disordered, *after* the cow-pox; and Dr. Rowley says, he was much diseased with eruptions and ulcers *after* cow-pox. This is a very serious charge against the cow-pox: it is possible, however, that these gentlemen, and their friends, have had ulcerations about their bodies, and been much diseased, *after* the small-pox, without any imputation on that disorder.

As this case has made a great noise, and caused considerable uneasiness in the minds of many anxious parents, I have once more inquired into it; and flatter myself, neither you nor your readers will have any objection to hearing the result.—Three weeks after the birth of this child, Mrs. Curling caught cold; and had a pain in her head, with which she has been troubled at times ever since. This had aggravated a nervous affection, under which she previously laboured. The child was vaccinated when ten months old; and weaned a few days after. From this period his health began to decline; which is no great wonder, when we consider that he was deprived of his best support at such a critical age. Six months after this, he had an eruption about his mouth, which continued three weeks. This is no more than what frequently happens to children, either from cold or teething; and would not have been thought detrimental, had it not happened *after* the cow-pox.

About nine months after vaccination, the disease occurred, which Dr. Mosely stated to be the small-pox, and declared *there could be no doubt of it;* though he had *never*

seen

seen it, and though the mother told him she did not know it to be the small-pox; and that the only two medical men who had seen it, pronounced it to be the chicken-pox.—So ready are the most sceptical of the antivaccinists, to believe what they wish to be true.

It was not till after this last disorder, that the child had the eruption which gave his mother the most concern. This was on the head; and whether occasioned by the small-pox or the chicken-pox, there is every reason to believe, would never have happened, but from want of care. It is no uncommon circumstance to meet with the tinea capitis after the chicken-pox; from a neglect of cutting off the hair round the sores. The accuracy of the statement here given may be relied on; since it was given to me by Mrs. Curling herself, and signed with her own hand.

The 101st case related by Dr. Rowley, is that of the child at Clapham, in whose arms, he declares, the matter produced the desired effect.—In my Treatise on the cow-pox, I have proved the contrary. He says, on the ninth day a spreading inflammation covered the body. This is not true. The inflammation, which was occasioned by the injury done to the arm, and not by inoculation, only commenced about that time, and gradually spread in consequence of neglect. Many days elapsed, before it had spread over the whole body; and there is every reason to conclude it would never have spread at all, had proper care been taken. The remark which Dr. Rowley makes on this case is curious. He says, "The matter supposed to be taken too late, which is candidly granted, and *shews vaccine malignity*."—How this is reconcileable to reason, is left to the *antivaccine malignity* of his surviving fellow-labourers to explain.

The 242nd case related by Dr. Rowley is that of a child of Mr. Richardson, in Cleveland Street. Dr. Rowley says, this child was buried by Mr. Carlisle of Clipstone Street; and it would be happy if we could bury the falsehood which he has brought forward on this occasion in the same grave. But justice to the present age and to posterity demands, that such a daring violation of truth should be exposed and corrected.

Dr. Rowley, in his zeal to destroy the credit of vaccination, not only represents this child to have died of the small-pox after the cow-pox; but to have died of the small-pox, after the cow-poxers had insured security. I have therefore inquired into the case; and am informed by Mrs. Richardson, that the child was inoculated for the cow-pock

cow-pock by Mr. Jones, then of Wigmore Street, but infection did not take place; and as Mrs. Richardson was then far advanced in her pregnancy, she proposed to defer inoculating it again till after her delivery; when she meant to have the two children inoculated at the same time. This, however, was prevented by the occurrence of the natural small-pox; which proved fatal. Here we see one instance of the base fabrications brought forward by certain medical men, who are interested in the question, to prejudice the public.

The 34th case brought forward by Dr. Rowley, is that of Miss Lutwidge, who is also stated by him to have had the small-pox after the cow-pox. This is the more extraordinary, when Dr. Rowley himself tells us, that the very gentleman who inoculated her, says she was not inoculated with the cow-pox but with the small-pox.

I have now before me a letter from Mr. Bliss, surgeon, of Hampstead, the practitioner alluded to, whom Dr. Rowley calls by way of reproach the gentleman vaccinator, positively declaring, that he inoculated Miss Lutwidge with the small-pox, and not with the cow-pock; as a confirmation of which, it was done in the year 1797, before Dr. Jenner's publication appeared. She had an eruption of pustules; and three years after, had a full eruption of the small-pox.

Mr. Bliss inoculated a girl in 1793; who likewise had several pustules, and considerable constitutional indisposition. She was afterwards three times exposed to variolous infection, in her employment of nursing children in that disorder. In the year 1798, however, she had a full crop of the natural small-pox; with much constitutional affection.

The 138th case brought forward by Dr. Rowley, is that of Mr. Twyford's daughter, of Wilsdon Green; whom he also states to have been inoculated for the cow-pock. He acknowledges, however, that this point was disputed. It is therefore evident, that had he not been determined to press every unfavourable report into the service of the antivaccinists, whether true or false, he would either have omitted this case; or have endeavoured to substantiate it by some kind of evidence.

I have now before me the copy of a letter from Mr. Haines, surgeon, of Hampstead, partner of Mr. Bliss, transmitted, with the former communication from Mr. Bliss to the Jennerian Society, in which he proves the gross and palpable falsity of this case also. Dr. Rowley says,

says, this girl had a very thick small-pox after vaccination. Mr. Haines being at Wilsdon Green, and knowing the case of Miss Lutwidge, related by Dr. Rowley, to be totally destitute of foundation, inquired into this also; and was informed by Mrs. Twyford, that this child and two others had been inoculated for the small-pox six years before, by Mr. Collins of Wilsdon, from a man who caught the small-pox in London, and communicated the infection in the natural way to his own children.

The three children who were inoculated, sickened at the usual time. The girl who is the subject of the present case, was exceedingly ill; and delirious one or two nights. Several pustules appeared round the inoculated part; which rose very finely. The progress of the disease was similar in all the children; and Mr. Collins pronounced them all secure from the future infection of the small-pox.

The girl has since had the small-pox severely. Dr. Rowley never saw her in either of the complaints; nor does it appear, that he ever took any pains to know whether the report was true or not. Having vowed that he would put an end to vaccination, he readily received and published every report that was unfavourable to the practice. When this girl was inoculated, her mother was so far from thinking it was with the cow-pock, that she had never even heard of the disease. I was yesterday at Wilsdon; and this instance of secondary small-pox was related to me by the sister-in-law of the patient; who was an eye-witness of the whole case.

The 418th case related by Dr. Rowley, is that of William Shepherd, said to reside in Chandler Street, in the same house where another case is also represented to have occurred. No number is mentioned; and I have tried to find out in what house William Shepherd lives, but in vain. The first case is reported by Dr. Rowley, on the authority of Dr. Moseley; who is said to have received the information from the mother of the child. Whether Dr. Rowley had Dr. Moseley's authority for the case, in which I am said to have been concerned, I know not; but whatever authority he had, I shall prove by the best authority possible, that the report is totally destitute of foundation.

It is stated in Dr. Rowley's book, that this William Shepherd was vaccinated by me. This is a point which may be ascertained, when the antivaccinists will inform us where he is to be found. It is also stated, that he has since been inoculated for the small-pox, by Mr. Richard-
son

son of Sloane Street; and that he went through the disease in a regular manner.—I have inquired of Mr. Richardson, whether he knows any thing of such a case; and he declares it is an utter falsehood. He never inoculated this William Shepherd; and never knew him.

This is one of the 218 fresh cases, brought forward by Dr. Rowley in the 2nd edition of his work. He tells us, they all came to light within a few days, with little solicitation on his part; which shews how ardently some people were labouring for the public good. He pretends that the friends of vaccination endeavoured to conceal these cases. To me, however, it appears, that those who propagate such reports, only expose their own folly; and those who wish to conceal them, or to prevent them from being thoroughly investigated, are no friends of vaccination.

The preceding case, in Dr. Rowley's book, is that of the daughter of Mr. Thompson, in Chandler Street, said to have been vaccinated by Mr. Leese, and afterwards to have died of the small-pox. This information is said to have been given by her mother to Dr. Moseley. The number of the house, however, where this Mrs. Thompson lives is carefully concealed; and although Mr. Leese has examined his register, he cannot find any such name. I caused an inquiry to be made by my Assistant throughout the Street; but he could not discover the residence of this or the preceding subject; so that we must wait for an investigation of the truth of the story, till Mrs. Thompson comes forward to attest it.

In another of Dr. Rowley's cases, mention is made of an abscess in the side; which is there ascribed to the cow-pox; but I have seen a letter from the medical man who attended the patient, from which it appears, that it was occasioned by a fall, which broke one of the child's ribs. Every true antivaccinist, however, will conclude, that it was all owing to the cow-pox.

When Dr. Rowley wrote his book, such encouragement was given to those who brought unfavourable reports, that it is well known, many of them were mere fabrications.—They were, however, all readily received, speedily published, and eagerly swallowed by the credulous multitude; many of whom have now great reason to repent of their folly. So rapidly, indeed, did these pretended cases of cow-pock failure, and cow-pock disasters, accumulate, that Dr. Rowley tells us, his senses were appalled, and his pen tired of recording them. A considerable number of

them

them appear to have been nothing but the itch; and when the case proved obstinate, either from neglect, or any other cause, the disease was attributed to vaccination.

I shall here quote one passage from Dr. Rowley's book, as an additional proof, how far he is worthy of credit.—"I have been in some vaccine storms; and have had *the buttons torn off my coat, cloth and all,* to convince me of the great and infallible excellence of cow-pox. I have seen some few of the vehement vaccinators redden like a flame with fury; *the lips quivering, the eyes starting out of the head, with flashing streams of fire;* the mouth foaming, and tongue pouring forth a torrent of hard words, like a thunder storm,—the fist clenched like a pugilist, ready to accompany the violent wrath with *other* knock-down arguments."—We are then given to understand, that the *mild* enemies of vaccination quit the scene; and, indeed, it is no wonder that these *gentle* and *modest* inquirers after truth should quit the scene; and fly from such formidable opponents.

Mr. Blair, in his publication entitled The Vaccine Contest, proved the falsehood of many of Dr. Rowley's statements, from his own book; and observes, that in a great proportion of the cases brought forward by him, he has not mentioned the names or places of abode of the patients; nor by whom they were vaccinated, if they ever were vaccinated at all. He has also alleged, that twelve or thirteen of these subjects caught the cow-pox by milking; without adducing any evidence to justify his assertion: and in no less than one hundred and forty-five cases, the patients appear to have been infected with the small-pox previously to vaccination.

Dr. Rowley is of opinion, that inquiries relative to the particulars, and the reality of the cases brought forward, may *confound fools;* but Mr. Blair justly observes, that none but *fools of the most dangerous stamp* would endeavour to decide in any case, without making such inquiries. He also observes, that the example of Dr. Rowley, in taking these idle reports on trust, has been too often followed; in consequence of which the public mind has been agitated, and grossly misled, respecting vaccination.

Mr. Blair is of opinion, that any person who peruses a fourth part of the works written in favour of the practice, will see the extent of the frauds, as well as the mistakes, of the antivaccinists; and perceive, that many of the cases which they hold up to the public notice, have been refuted again and again. He will perceive, that these adventurers

venturers have been raking the very kennels of human misery for diseases, in order to impute them all to vaccination.

After modestly confessing, that his own experience has not been equal to that of many others in this department of medicine, Mr. Blair informs us it has nevertheless been such as to justify him in asserting, that it would be nothing short of insanity to discontinue the practice of vaccination; to substitute the curse of the variolous pestilence in its stead; and to scatter among our peaceful fellow-citizens, in this great metropolis, firebrands and death!

Dr. Rowley having stated, that it is the duty of *honourable men* to alarm mankind, and that in some places people were now inoculated for the small-pox by farriers, at five shillings a head, Mr. Blair observes, that the zeal of *many farriers*, and such like *honourable men*, in spreading a direful pestilence, *for the sake of a little pelf*, is acknowledged and deeply lamented. He then remarks, that the insatiable love of money unhappily prevails; but he is at a loss to conjecture, why this scourge of human nature continues to be purposely inflicted at the Small-pox Hospital, and sent forth to desolate the inhabitants of London. He knows not how to reconcile this conduct with the original design of that Institution, when the Governors declared by their last Report, that the constant success of vaccination "had confirmed all that was promised by so invaluable a discovery."

Dr. Rowley thinks a change of system necessary in the Small-pox Hospital; and Mr. Blair agrees with him. He is decidedly of opinion, that the continuation of Small-pox Inoculation Hospitals in this vast metropolis is a fertile source of misery and death. He wishes them to be set apart entirely and exclusively as *pest-houses*, to receive all those patients who have casually become infected with the small-pox; but never to be employed for the purpose of inoculation. He justly remarks, that while the contrary practice prevails, and is encouraged, we cannot exterminate the small-pox from this populous city; since there will never be wanting sordid and avaricious persons, who, from motives of self-interest, will perpetuate the stock of contagion.

As to the open and professed opponents of vaccination, Mr. Blair observes, that while they reproach the friends of the practice for not accomplishing their humane intention in England, as well as in other parts of the world, they

are

are exerting their utmost endeavours to prevent it, by disseminating the infection of the small-pox.

But the most dangerous enemies of vaccination are its *pretended friends*; men who *openly* profess to favour the practice, but *secretly* endeavour to undermine it. The public must be surprised to hear, that one individual of this description, who in those writings where his name appears, *extols vaccination*, in his anonymous publications recommends *the general inoculation of the small pox*.—Such duplicity ought not to pass unnoticed.

There are, it is well known, certain adventurers, who have embarked in that *trading vessel*; and although she is now in a shattered condition, they are still determined to cling to the wreck. They are aware, that their own existence as medical characters is identified with that of the small-pox; and that they must stand or fall together. It is, therefore, unreasonable to expect, that they will ever read a recantation of their errors.

Since the foregoing remarks were sent to the press, another Number of this Journal has appeared, in which Mr. Royston notices Dr. Adams's defence of vaccination, and observes, as Dr. Adams had done before, that no objection had been raised against the practice in any part of the world except England. I have already corrected that error; but had it been otherwise, it is surprising that Mr. Royston did not know what objections have been excited against vaccination in many other countries, particularly in France, Prussia, and America.

I stated on a former occasion, that vaccination had not been propagated through Africa, as Dr. Adams supposed. About that time, the news arrived of the practice being introduced at the Cape of Good Hope, by means of matter brought in a Portuguese ship. This was probably the matter brought by Dr. Balmis, the commissioner sent out on the philanthropic expedition by the King of Spain; as he returned from the Indian Seas in a Portuguese ship, about that period. I am, however, informed by Mrs. Matra, widow of the late Consul, at Tangiers, that Mr. Matra introduced the practice there four years ago, with matter from Gibraltar; but, from want of proper attention in the practitioners, it soon ceased. This circumstance was reported here about the time; but not authenticated till now.

Mr. Royston has also noticed my answer to Mr. Birch; in which, he says, *the warmth*, if not *the asperity*, of my manner, is strikingly characterised. In this laco-

nic observation of Mr. Royston, *the warmth*, if not *the asperity*, of *his* manner, is strikingly characterized.

He quotes a passage from a letter of Dr. Pearson, in the Philosophical Magazine for June, 1806, in which it is asserted, that " the publications in favour of vaccination are written, for the most part, with the spirit of animosity, and not of investigation." This is rather unfortutunate; since it is well known that many of them, and those none of the mildest, were written by Dr. Pearson himself.

In this passage, quoted from Dr. Pearson by Mr. Royston, with seeming approbation, since he has not corrected the error, we are also told, that neither the friends nor the enemies of vaccination seem to be aware, that vaccination may leave one in a thousand still liable to the small-pox, and yet finally effect the grand object in view, the extermination of the small-pox. This is allowing very little sense indeed to any of the writers on the subject, except Dr. Pearson and Mr. Royston.

I shall prove, that this opinion of Dr. Pearson and Mr. Royston is erroneous. It seems to be intended, in the first instance, as a sarcastic reflection on the Report of the Royal Jennerian Society, published a short time before. It must however, appear evident to every man who reads it, that even that Report contains a refutation of the calumny.

It is entitled, the Report of the Medical Council of the Royal Jennerian Society *for the Extermination of the Small-Pox*, on the subject of vaccine inoculation; and it concludes with a solemn declaration, that in the opinion of the Medical Council, founded on their own experience, and the information which they have collected from others, that mankind have already derived great and incalculable benefit from the discovery of vaccination; and that it is their full belief, *that the sanguine expectations of advantage and security, which have been formed from the inoculation of the cow-pox*, will at length be completely fulfilled. It is well known, that one of the sanguine expectations of advantage and security is, as the very title of the Society implies, *the extermination of the small-pox*.

This Report, though nominally the Report of the Medical Council alone, has been repeatedly sanctioned by the Society at large, and published by their authority. After this, it is rather surprising, that any gentleman who pretends to investigate the subject, should commit such a mistake.

Mr.

Mr. Royston appears to be equally unacquainted with the other circumstances attending the history of vaccination, and the opposition which it has had to encounter. He speaks of Dr. Rowley as if he were the earliest opponent of vaccination; and Dr. Moseley as one who afterwards entered the lists against it, degrading the mental powers which he possesses, becoming the coadjutor of Dr. Rowley in this controversy; and disgracing himself by gross exaggerations, and arts which the vulgar and unlettered understand, and practice, with an adroitness equal to himself.

Mr. Royston sees, or thinks he sees, a greater degree of candour and moderation in the opposition of Mr. Goldson and Mr. Birch, than in that of Dr. Rowley and Dr. Moseley. It appears, however, to me, as well as to others who are conversant with the subject, and have examined the writings of Mr. Goldson and Mr. Birch a little deeper than the surface, that they are equally uncandid; that their moderation is rather pretended than real; and that their hatred of vaccination is full as implacable as that of Dr. Moseley or Dr. Rowley.

Ere I quit this subject, I refer those who doubt the opinion which I have given of the writings of Dr. Pearson, to the publications of Mr. Hicks and Mr. Creaser; and to a lettter from a physician of Bath, in this Journal for 1802; in which Dr. Pearson is accused of hostility to Dr. Jenner, of jealousy, of injustice, and of attempting to rob the discoverer of vaccination of his reward, and of his well-earned fame.

Mr. Royston notices the various defenders of vaccination; one of whom has distinguished himself by his enmity to Dr. Jenner, and another as much by the *moderation* of his talents as of his zeal; and with unparalleled duplicity, been exerting his *influence* to promote the inoculation of the small-pox. Such are the authors whom he holds up to public admiration. Such is the sample of the great work, which we are to expect from him!

The next article I shall allude to, in your last Number, is that on burns and scalds. Without pretending to decide a question, agitated by much more experienced practitioners, I beg leave to state one fact, in a patient of my own. A lady covered her foot and ancle with spirits of wine, and then set fire to it, as a remedy for chilblains; but found it extremely difficult to extinguish the flame.

Having often used oil of turpentine in similar cases with apparent advantage, I was much disappointed at the result

sult in this instance; for it not only aggravated the inflammation in the parts affected, but excited an erysipelas on every part to which it was applied; and even on the other leg, in consequence of its effluvia, which compelled me to discontinue it. I then applied a solution of cerussa acetata, which soon allayed the inflammation; and afterwards healed the sores without difficulty, by the usual means.

I now come to the eccentric article, called "An Abridgment of Mr. Marson's Papers on Vaccination; in which he complains of your backwardness in publishing his letters, and asserts that I have always been fortunate in the publication of mine, however prolix. I beg leave, however, to tell Mr. Marson, that a letter may be long without being prolix; and prolix without being long. Besides, a remark of this kind comes with an ill grace from Mr. Marson; who confesses himself guilty of this fault, in a former volume of this Journal; in his dissertation on *close-stools.*

Mr. Marson informs us, that *he* is "one of those long acquainted with variolous inoculation." In this he appears to me to arrogate to himself rather too much; since, as far as I can understand his meaning, he insinuates that those, against whom his arguments are directed, have not been long acquainted with that practice. I have been acquainted with it more than forty years; but do not pretend to know how far that period of probation may be deemed sufficient in the opinion of such a veteran as Mr. Marson.

But Mr. Marson tells us, that he has compared the inoculation of the cow-pock with that of the small-pox: so have I. He has told us, vaccination fell into hands that never inoculated before: so have I.

He tells us, these inexperienced people thought the cow-pock such a mild affection, that a puncture would do the business, and that nothing further was necessary to make vaccination complete. If Mr. Marson's remark means any thing, it means to insinuate, that I am one of those who never inoculated before, and that I am one of those who think a puncture all that is necessary in the inoculation of the cow-pock. As an answer to this insinuation, I refer those who think it worth inquiring into, to what I have written on the subject, in this Journal and elsewhere.

Mr. Marson says, "I do assure you, gentlemen, much is wanting to make vaccination complete; and it is from this imperfection of our knowledge, that disputes and cavils

cavils have arisen between THE THEORIST and *the experienced* practitioner." Here again he reminds you, that I am a mere theorist! and when he afterwards tells you, what you very well knew before, that I have the honour of being a Vice-President of the Jennerian Society, he ought to have censured the society, who exalted me to that distinguished situation, from an idea that I had extensive practice. They were even so rash as to suppose, that I understood vaccination almost as well as Mr. Marson.

Mr. Marson says, it is the opinion of Dr. Willan, in his publication, that "the employment of recent lymph seems *no essential requisite*; for the disease is *as often produced by dried as by fluid matter*; though *the former may be more liable to fail.*" This needs no comment.

Mr. Marson's next paragraph is obscure, and almost unintelligible; but, as far as I am able to guess at his meaning, he contends that dry matter is *more likely* to succeed than fluid; an opinion so contrary to that of all other experienced practitioners, that I think it unnecessary to say much about it. I must, however, state, that medical practitioners frequently apply to me for a vaccine patient, from whose arm they may transfer the fluid matter, because they have repeatedly failed with that which is dry.

Mr. Marson says no particular address is required in performing the operation. No other address is required in performing the operation, than what has often been explained in the various publications on the subject; yet every one who is conversant with the practice knows, that one inoculator succeeds oftener than another. Mr. Marson says, I never impute failures to insusceptibility in the patient. In this he is mistaken; I sometimes impute failures to that cause; but more frequently to some defect in the operation. As to the marks of *a hurried judgment*, as Mr. Marson calls them, I leave to the world to decide, whether they are more conspicuous in my writings or his.

I do not agree with Mr. Marson, that the arm of a healthy subject is in greater danger of violent inflammation, than that of an unhealthy one: but I readily agree with him, that if such a circumstance should occur, neither regimen nor medicine ought to be neglected.

What Mr. Marson says about pulsation is so obscure and unintelligible, if not contradictory, that I shall leave it to himself to explain it. When he talks about my prejudices, and modestly hints that my opinions are erroneous, from a want of practical attention; I beg leave to say, that my practice and information on the subject are far more extensive; and my attention at least equal

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to his. He recommends to me the plan of treating ten patients with diet and regimen and ten without. I thank him for his advice; but having seen sufficient of the effects of such a plan in the practice of others, to convince me of its inutility, and of its injurious effects, I must be excused from making the same experiment.

I am, &c.

JOHN RING.

New-Street, Hanover-Square.

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

YOUR having honoured with insertion, in your Number for February, the hasty remarks on burns and scalds, bearing my initials, is an inducement to address you again. It has given me pleasure to see the subject so ably investigated, and to find that the cooling treatment, in the early stages, has been so often and successfully employed; while I hope that the opposite plan will not, upon suitable occasions, be neglected. There is a consequence of extensive burns, which I presume is of rare occurrence, and has not attracted much notice. As I had lately an opportunity of seeing it, I shall briefly make it known.

CASE SIMILAR TO BRAIN FEVER, SUCCEEDING A BURN.

A middle aged man, who, with many others, had been universally scorched by the firing of a coal-mine in this neighbourhood, and who had been treated according to Dr Kentish's method, for eight or ten days, with apparent success, insomuch that a great part of the skin had been reproduced, became suddenly delirious. He seemed very restless; his pulse beat 130 weak strokes in a minute; his tongue was perfectly clean, his feet rather cold, his skin cool. The resemblance of his case to the disease, here called the Brain Fever, which attacks men that drink by the week or fortnight and give it over suddenly, suggested a similar treatment. He was ordered a pint of Port wine warmed, and with the addition of spices, to be taken as expeditiously as possible, and so soon as medicine could be sent, to take a draught with thirty drops of laudanum and a drachm of æther, every two or three hours;

hours; which were to be gradually reduced in strength after the delirium had subsided, and sleep had been procured.

He was directed to have strong soups as food, till he could return to his common diet..

He began this plan in the evening, and towards morning he fell asleep, and awoke perfectly well and unconscious of what had been passing. His remedies were gradually withdrawn. I have seen but one case of Brain Fever (its nosological name I cannot easily find) the symptoms of which were very similar, and yet not so severe, while their cause was much more easily ascertained. I shall mention them, as the disease, it is to be hoped, is not frequent, and as the mistaking of it might lead very readily to fatal practice.

Case of Brain Fever.

A middle aged man, who had been intoxicated for a week, indeed had tasted nothing but spirits, was seized in the night with convulsions. When I saw him, he was vomiting bile, and nothing of the simple kind offered, had remained in the stomach. He was directed to have a strong tumbler of brandy and water, and some warm beef tea; the former twice or thrice in the day, the latter as often as he could take it.

Having been very costive a brisk purgative was necessary, and the above plan was intended to prevent the attack of fever, which was to be otherwise expected. He had an opiate at night. He was perfectly well next morning, and going about as usual. His friends were cautioned, not at once to withdraw his spirits and water.

They gave him some that day and he was well; but next day he got none, and by the evening was seeing white ghosts, and a variety of invisible beings. When spoken to, his answers were for a moment rational, but wandered in the next to a thousand different subjects, mostly marked by gaiety.

He talked incessantly. Pulse 30, intermitting at times, not remarkble in point of strength. Tongue perfectly clean; skin cool; countenance expressive of a thousand feelings in a minute; eyes remarkably glistening and animated. He was ordered a draught of thirty drops of laudanum, which had not been used the night before, and the shops had been shut, so that it could not be made stronger. He had a glass of spirits and water and was put to bed. He at first had been more quiet, but did not

not sleep; but about one in the morning he got up, insisted upon going out, and became ungovernable.

He sometimes saw watchmen coming to drag him away, at others made merry with his friends, visible only to himself.

He refused to take any thing, and to return to bed, and struggled and shouted violently, when compulsion was used. He attempted to cut his throat, and to get out at the window. Just when most outrageous, I dashed a pitcher of water upon his face. He shrunk into a corner, begging piteously for mercy, and promising to do any thing. Having procured laudanum, he took one hundred drops, and was ordered fifty every two hours, till he should sleep. Beef tea, &c. were ordered as before. He slept at five in the morning for four hours. The laudanum was reduced to thirty drops every two hours during the intervals of sleep. He slept some hours in the afternoon, and all night, and was quite well next day.

The laudanum was continued in gradually reduced doses for three days, with 30 drops every night at bed-time. The bowels were opened regularly. He was much better than for some months previously, had regained a good appetite, and for a week or two had abstained from every liquor, except water.

Remarks.

It will surely occur, that there is a striking similarity between these two cases, though I did not see the former so early after the attack. The pain of burning and turpentine having been applied to nearly the whole surface, must have been a high stimulus; its sudden subsidence, like the sudden abstaining from spirits, seems fairly attributable as the cause of the subsequent fever, in the former case as well as in the latter. Experience, independently of theory, has approved of the practice detailed. There are individuals, I am credibly informed, in this neighbourhood, who have survived seven attacks of Brain Fever.

I have been also well assured, that where blood-letting, blistering, and abstinence have been prescribed, the patients have to a man, died. I saw a gentleman about a year ago, who would, probably, have illustrated the truth of the above information.

Case of Paralysis, &c. from suddenly leaving off Drinking.

He was middle-aged, immensely corpulent, had drank two bottles a day of brandy, for a fortnight; upon leaving it

it off, at once, had become paralytic of his hands and feet. His medical attendants had let blood (I believe) but at any rate had purged him freely, and recommended abstinence. He had become suddenly and alarmingly worse. He lived fifteen miles off, and I did not see him till midnight. His breathing was greatly oppressed; his extremities cold; his pulse fluttering; his face blue; and he was shivering. I ordered him a pint of warm brandy immediately; by morning he had taken a bottle and a half.

When medicines could be procured, he was treated as in the former instances, and recovered, and remains temperate. It would seem that the human system will bear no sudden reduction of high stimulant powers with impunity; and, therefore, that we ought to be very inquisitive as to the causes of such peculiar and rare disorders, and particularly, as it may sometimes be attempted to conceal them. I shall be happy if these sketches prove sufficient resemblances to make known the originals, should they be introduced to any of your readers, as strangers.

I fear you will think I have been very diffuse; but I leave you the liberty of dealing with me as you please.

I am, &c.

T. M'WHIRTER, M.D. Edin.
Physician to the Newcastle Dispensary.

Newcastle upon Tyne,
June 16, 1807.

Answer to H. S's Case of Obstinate Gleet.

Sir,

YOU observe, that in the first instance the disease was infectious; it must then have been gonorrhœa, and from the irritative fever induced I should suppose virulent. In men we often meet with cases, where virulent gonorrhœa terminates in gleet, or excretion of the mucous glands of the urethra; but in women this rarely happens, they have the disease at all times more mild, their urethra being shorter. They cannot be affected with swelled testicle, phymosis or paraphymosis; nor have they great chance of stricture in the urethra. But sometimes, when the affection is violent, they have very painful erections of the clitoris, accompanied with menorrhagia, or symptoms resembling it. I am apt to think, that the vagina is not unfrequently the seat of gonorrhœa as well as the urethra.

In

In this case, the mode of treatment employed by H. S. was very proper, and it is surprising that it was not attended with complete success. He observes, that the seat of the disease is evidently the urethra, "*as all the discharge proceeds entirely from it, and not from the vagina*, and that the eruption has never entirely left her. I am of opinion, that the pustular eruptions in this case, are occasioned by the discharge being of an acrid nature; they will sometimes proceed from stimulant applications, as ung. hydrag. fort. but, wherever they appear, there is always inflammation, as every pustule may be considered as a small abscess. A gleet is never known to produce either inflammation or pustular eruption, and the discharge is neither acrid nor infectious.

I would recommend to H. S. to discontinue giving medicines internally, except a decoction of the woods. To trust entirely to Dr. Kinglake's remedy for gout—cold water; frequently bathing with this, and drying the parts completely afterwards with a soft towel, and then sprinkling the pustular eruption with oxidum zinci præparatum, will very soon effect a cure.

A. F

To the Editors of the Medical and Physical Journal.

Gentlemen,

FROM the perusal of the various papers in your Journal, I have derived much pleasure and great information; and I consider a periodical work of that nature as a vehicle admirably calculated to diffuse, through a large space, the streams of medical knowledge; and by collision of sentiments upon subjects, respecting which there has been a diversity of opinion among practical men, and by fair manly discussion to elicit truth, the great object of all enquiry.

Yet although I confess that I have read, with great satisfaction, papers written in this spirit, and without flattery entertain a high sense of your discrimination respecting the admission of them, yet I cannot restrain my indignation, when I see the purpose of your Journal abused as it is by a miscellaneous paper, occupying three pages of the Number for this month, of which the clear object is to give vent to a splenetic disposition, without conveying one useful

useful idea. The letter is divided into three parts, viz. on *infantile diseases*, on a *demonstration of a brain*, and on the *treatment of a case of popliteal aneurism.* I have placed them in an inverted order, according to the real importance of them.

Now, mark the information which he gives on infantile diseases! He says, that "an admired Reporter observes, in your crowded community, (London), the mortar and pestle are hourly chargeable with murder," and then, for your information and that of all your readers, he adds, that in croup, chin-cough, measles, and pneumonia, which are daily carrying off a portion of innocent and highly-regretted little victims, the lancet, if timeously resorted to, the leech, or the purge, are of great use. This is the whole of his observations upon the copious subject of *infantile diseases*, and happy it is for the natives and inhabitants of Derbyshire that they have so wise a practitioner among them. It is a pity that he did not give his name and place of abode, that they might have known where to apply for assistance in these juvenile diseases, at least where not to apply.

Another part of the strictures of the *Derbyshire Practitioner* is on a demonstration of the brain.

What he means should be understood by this part of his paper, I really am entirely at a loss to imagine. The facts are these:

At the last Derby Assizes a man was convicted of murder, and his body given to the surgeons for dissection. The dissection was admirably performed by a gentleman of good abilities, and very conversant with anatomical subjects; and some drawings made by a very ingenious man, not of the medical profession, from some parts, especially the dissection of the parts concerned in the operation for the popliteal aneurism, both in their natural state, and when altered in the operation from their natural position. Many medical men of Derby and its vicinity attended the dissection, and some of them were desirous of seeing the state of the brain in a person destroyed by hanging. It was therefore examined by the gentleman who conducted the dissection, who was very much accustomed to such a task, and by others who were present. No detailed demonstration was attempted or given. These are the facts, out of which the *Derbyshire Practitioner* continues to observe, that he "had some *awkward* feelings; *awkward*, because he did not conceive himself in a situation to interfere." I dare say that he had some awkward feelings of incapacity and inferiority, if

if I may judge from the composition of the whole of his paper, at the end of which he mentions the name of Sir William Blizard, whose lectures our Derbyshire Practitioner attended. You, Gentlemen, are well acquainted with the personal worth and professional character of this Gentleman; no man has contributed more in every way to the advancement of his profession; and if all his pupils have not attended to his instructions and profited by them, the fault is not in the teacher.

The other part of the paper of the *Derbyshire Practitioner,* is evidently designed to convey a censure upon the treatment of a case of popliteal aneurism, in the Naval Hospital at Deal. I have again read through the history, treatment, and remarks on that case in your Journal, and it appears to me that from the commencement to the fatal termination of it, nothing could be more judicious.

The surgeon waited before the operation to give time to the anastomising branches to dilate, then performed Mr. Hunter's operation; and upon a hæmorrhage subsequently taking place, which endangered the man's life, amputated the limb as the only chance of saving it.

Yet the *Derbyshire Practitioner* "cannot think that the moment for amputation was properly chosen," when the patient had lost four pounds of blood. I presume that he thinks it would have been better to have waited till he had lost eight. He mentions it as a kind of discovery of his own, "that the operation (of amputation) could not be undertaken without the prospect of losing some;" and further, "that there is a point *we* conceive, in extreme inanition, a single advance beyond which is positive and immediate destruction.

Here, Gentlemen, are two great discoveries made by the *Derbyshire Practitioner.* The first is, that in cutting off a limb some blood may be lost. I am sure that this must surprise you, who live in the metropolis, and often witness such operations. The other is, that when more blood is lost than is compatible with life, a man dies. Can any thing be more astonishing? Yet the Surgeon at the Deal Naval Hospital had the wit to discover this first, and therefore wisely determined to amputate the limb, without being aware that a Practitioner in Derbyshire would make the same discovery.

The *Derbyshire Practitioner,* or *Practitioners,* (for he always expresses himself by the plural *we*) next observes, that *we* have no means of knowing whether the bleeding was venous or arterial, and then, in three lines afterwards,

adds,

adds, " nor is it perhaps material to the present question." If then, according to his own shewing, it was not material to the present question, where was the use of the inquiry?

Next the *Derbyshire Practitioner* suggests his mode of managing the patient. *We* would first think of means to stay for a while the vital torrent, (" what bombast!!) *We* would have dilated the cyst to its extent; and would then, after evacuating it of its accumulated filth, have crammed it with graduated compresses of sponge, and with the help of a bandage, would have kept up a certain resistance to the bleeding point, or surface." All this *we* would have done. Can more preposterous nonsense be written than this, as applicable to such a case, especially when the surgeon, who treated the patient, states, that " after the most severe pressure which possibly could be made," he lost some blood.

The *Derbyshire Practitioner* next, with great gravity, adds, " the limb, no more than the life of the patient, might not have been saved by such procrastination." So he recommends a practice, by which neither life nor limb might have been saved, and tells his medical brethren that it seems to *us*, as if it would have been the most rational practice.

I intreat your pardon for trespassing thus far on your valuable pages, and intreat that you will in your next Number grant a place to these remarks, from your constant reader,

MOROMASTIX.

To Dr. BATTY.

SIR,

WHEN a disease is incurable and contagious, it is no proof of wisdom or courage to attack it; it may afford an example of temerity. If I thought the style of humour and levity an habitual and incurable disorder in the writings of your correspondent T. Y. I should exhibit my own folly in endeavouring to divert its course. That my wish to do it is strong, must be evident from volunteering my services in the most ungracious of all offices, telling a man his faults; but I am impelled by other motives, by the desire I have to amend and caution a natural and open disposition which I fancy I perceive, and from believing it cannot be difficult for a gentleman who can express his thoughts with

with such freedom and sprightliness, to convey his sentiments on any subject in terms not only to arrest the attention, but claim the approbation of your readers. I beg your correspondent will not immediately fancy I am a stiff intolerant pedant, but surely, though a bruised forehead, or a broken shin, may not require much seriousness in the description, yet the remedies, whether strictly medicinal or domestic, are important acquisitions to the public, and entitled to their rank as benefactors to mankind. Every thing relating to medicine, claims the respect of the world; and if we do not promulgate its doctrines with pomp and splendor, we should be careful that its maxims are delivered with propriety and decorum. While I am recommending a little serious consideration to T. Y. befores he writes, I am as ready to praise his spirit, activity, and presence of mind, in putting to the test of experiment, two opposite modes of treatment, that certainly interest the medical world, from the indisputable authority with which they are supported. I hope, as a constant reader of your useful Journal, to be soon favoured with more of his communications, and to find I am not mistaken in the opinion I have formed of his disposition and talents.

I am, &c.

T. SMITH.

Edinburgh, July 6, 1807.

To Dr. BATTY.

SIR,

IN perusing the lively correspondence of your animated writer, T. Y. in the last Number of your useful miscellany, I was, I confess, disappointed to find that his ingenious communication tended rather to afford a display of laconic wit, than any useful or important information. There is no subject, I conceive, which demands so much minute attention, and which we ought with equal assiduity to investigate, as the science of medicine; and I am fully convinced, that there is no pursuit so rational as an indefatigable attention to medical researches; but I fear that our ingenious correspondent has mistaken a speculative curiosity for a laudable desire of information from novel discoveries.

The "Ars medicinæ, is a subject which has engaged the attention of men of the first literary abilities, and those in general

general to whom medicine is indebted for some of its most useful discoveries, have always treated it with that serious attention, which its acknowledged importance demands.— On whatever subject cheerfulness can be judiciously introduced, it will, (I allow) afford a lively air, and tend to unite agreeable amusement, with useful and necessary information. But whenever this vein of pleasantry is indulged beyond its proper limits, and converted into levity, it is, (I think) degrading a subject, upon which both private happiness and general welfare are dependant. I shall only offer a single observation with respect to the different modes of treatment adopted, and leave Dr. Kinglake and Dr. Kentish where T. Y. has left them, till some future opportunity occurs, to decide the difference between these zealous advocates for their respective Theories.

Improvement in medicine is a "*desideratum*" which would at all times be acceptable; but whenever any new *hypothesis* is introduced, I would recommend our correspondent in particular, and medical practitioners in general, not to desert the beaten path which experience has manifested to be beneficial, till they are convinced that the principle upon which they act, is as consistent as the treatment they adopt is successful. Towards the close of his communication, some phrases were made use of, which I thought beneath the importance of the subject. As for gonorrhœas being cured without any internal medicine, I say nothing, nor do I wish to dispute his word, having mentioned that personal experience had confirmed his assertion. But when he informs us, that "it is an even bet that port wine or scraped potatoes will heal a bruised forehead as readily as a solution of sal. ammoniac," he descends much below the dignity of the subject; and whilst he displays the fertile ingenuity of his own imagination, he strips medicine of all the honourable plumes of science, and makes it appear in no higher light than an ordinary mechanical subject.

If T. Y. is induced by these observations to recollect, (when he next appears in the Med. and Phys. Journal) that he is addressing men of science and erudition; to whom useful discoveries, or serious information, would be more acceptable than lively displays of eccentricity or animated turns of wit, the design of the writer will be fully accomplished.

ALIQUIS.

July 11, 1807.

CASE *of* COMPOUND FRACTURE *of the* ANKLE JOINTS; *By* MR. EVANS, *of Ketley.*

JULY 1, 1806. James Dainty, a boy 15 years of age, was with several other persons descending into a coal mine by means of a rope fastened to the barrel of a steam engine, which being under the management of a careless boy, part of the machinery gave way, and they were all precipitated to the bottom of the pit, by which accident he had both his legs fractured. The right had a compound fracture of the ankle joint, with a wound 9 inches long in a curved direction up the limb, and the astragalus completely removed from its connexion with the os calcis and metatarsal bones, lying out of the joint, adhering to a portion of the capsular ligament with the foot turned inwards, exposing the whole cavity to view. From the appearance of such a formidable injury, it was a matter of some consideration whether it would be most prudent to amputate or attempt the preservation of the limb; from my usual success in the cure of compound fractures, where the principal blood vessels were *not* divided, I was inclined to adopt the latter plan. After the astragalus was separated from the portion of ligament to which it was attached, the wound was cleared by means of a sponge well moistened with warm water, and the foot placed in its natural position, and the edges of the wound brought in contact with sutures; the parts were afterward covered with soft linen cloth of several folds, well saturated with a solution of crude ammonia in vinegar, over which a bandage was applied to secure the foot in its proper situation; the leg was then laid on its outside, with the knee bent, supported by pillows; the bandage being kept constantly wet with the above solution. By the 27th of the same month the tension had subsided, and the discharge from the wound greatly diminished; the cavity of the joint being filled with healthy granulations, which gradually became more firm. In the space of four months the patient was able to bear some weight upon the limb, the wound being three parts cicatrized. In nine months he was perfectly cured, and returned to his work without any deformity. He enjoys some degree of motion in the joint, and walks with little lameness at this time.

N. B. The bone is now in my possession for the inspection of any one who may wish to see it.

July 13, 1807.

To

To the Editors of the Medical and Physical Journal.

GENTLEMEN,

I Observe in your Journal of this month, an alleged case, in which the local application of a saturnine solution is stated to have been productive of very alarming consequences. The case, I think, as at present recorded, is sadly deficient in detail, and can scarcely be looked upon as a decisive example of *gastrodynia* * arising from repelled gout in the foot. The cause of complaint not only seems *incautiously* assumed; but there appears some ambiguity in the nature of the complaint itself. But admitting the correctness of the views which have been taken of this case, and two others alluded to, we must be allowed to differ widely in our sentiments from the practical application which has been drawn from them. The difficulties which occur in our science, in an especial manner, in forming a solid judgement from experience, are great and numerous; this discouraging truth, indeed, we are taught in our first aphorism. But these difficulties, your correspondent, Mr. Pope, has on this occasion avoided, by forming a precipitate and rash conclusion, on the foundation of the result of merely three ambiguous cases of gout. Mr. Pope, in a serious exhortation, advises us to condemn the cooling treatment of the disease, without any reserve, as a most obnoxious practice. These are his words, "Let us not, in this enlightened age, give up *that knowledge we have of the animal economy,* and instead of employing safe and sure means, make use of those almost approaching to *empiricism.*" But though Mr. Pope thus advises us to abandon the means of diminishing the topical inflammation in gout as empirical, he acknowledges, at the same time, that they have sometimes "*acted like a charm,*" and have "had the most instantaneous and *pleasing effects.*"

But I must observe, Mr. Pope appears in some measure, to apprehend that the three cases of gout, which he has brought forward, *may not* have the desired effect of exciting total antipathy to the remedy which was employ-

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* I shall make use of this term to express the complicated derangement of the stomach, which takes place in retrocedent gout.

ed in them. I cannot otherwise account for any nec essity on Mr. Pope's part, of *imagining cases* of deplorable and destructive effects being produced in "many instances," by the local inflammation in a paroxysm of gout subsiding from the application of cold. Mr. Pope tells us, he is "ready to admit, that in *many instances* cold has been productive of metastasis, producing *death*, and *very often* states nearly bordering upon it." Pray, gentlemen, how "many instances" of cold producing death, does Mr. Pope's fertile imagination choose to admit? One hundred, or one thousand? That metastasis of gout (to use an incorrect phrase) has frequently proved fatal, we have abundance of proof, and sufficiently obvious reasons—the metastasis arises from the *natural progress of the disease*, and it has been furthered instead of being arrested. The agency of *cold*, in such cases, is perfectly out of the question, and for the best of all possible reasons, it has been studiously kept aloof (I had almost said for some yards) by the interposition of *warm* rollers of flannel. The temperature of the patient's apartment, however low, can no more act upon his extremities than the climate of Nova Zembla, however severe, can at this distance act upon *ours*. Thus I am perfectly at a loss to conjecture in what manner Mr. Pope has been able to detect such disasterous consequences of the employment of cold; because this mode of treatment has but very lately been introduced in modern practice; is at this time little in vogue; here and there only a case has occurred to a practitioner; and they have been construed into objections. If then Mr. Pope *knows* of many instances of gout in which cold has had fatal effects, a reference to these instances must be of the utmost consequence; for then two opinions, I will venture to say, cannot exist upon the subject. I have thought proper to insist upon Mr. Pope's imaginary objections, in part, on this account; the question of cold, as a topical remedy in attacks of gout, has given rise to much declamatory contention; and Dr. Kinglake has been attacked, in consequence, from all quarters, and on different occasions, with explosions of eloquence; but the lack of facts we are now able to explain; they have been considered *as matters of course*, and *admitted* accordingly.

I am induced, gentlemen, to offer a few desultory remarks on the pathology and treatment of *gout*, because I am persuaded *there are forms* of this complicated disease, in which the application of cold will prove a highly beneficial remedy, and *these forms are well defined*. Further, the

the discussion which Dr. Kinglake's proposal of cold, as a powerful resource for this disorder, has excited, appears to have been conducted on confined views of its history and management; so that the practice has been extolled by some and decried by others, without sufficient discrimination.

If I had any intention of going over the whole treatment of gout, of course, the management of patients, in the intervals, would be taken up at a considerable length; for it is particularly in the way of prevention that our exertions are so eminently successful; and certainly the predisposition to gout, of all others, may by the power of prophylactics, be rendered completely dormant. Bodily exercise, strict temperance, and due perseverance, we know, has on many occasions warded off the paroxysms, and extinguished all tendency to them. Hence the laconic prescription for a podagric, "Work for sixpence a day and live upon it." I will only observe further, that sea-bathing, whilst the constitution is unbroken by an irregular life, or repeated attacks of the disease, may be looked upon as a serviceable part of the regimen. We know the great connection gout has with dyspepsia, and that a little indigestible matter in the stomach is frequently sufficient to excite a paroxysm. Cold bathing is the most availing resource we possess in dyspepsia, and on this ground I recommend it, to give tone to the digestive organs, as well as to invigorate the whole system: and thus we may produce, in some measure, the double effect of diminishing predisposition upon the number of exciting causes.

It would be trifling to urge the propriety of removing a paroxysm of gout on its own account. The condition of the patient from excessive irritability and urgent pain is a sufficient motive, if his sufferings are to be held in any estimation. Before, however, stating those forms of gout, which appear to me to justify and require the topical application of cold, I may observe that the recommendation of cold as an useful and secure remedy, does not merely rest with modern advocates. So far back as the time of Celsus, we find the employment of cold in certain forms of the gout sanctioned. *Celsus*, who is acknowledged to have been a cautious and judicious practitioner, prescribes cold as a local remedy in gout, and speaks of it with praise. When the joints of the hand or foot are affected with gout, he says, if there is tumefaction and increased heat, cold is more useful than warmth, "Seu vero tumor calorque est, *utiliora* sunt refrigerantia, RECTEQUE IN

 AQUA

AQUA QUAM FRIGIDISSIMA ARTICULI CONTINENTUR; sed neque quotidie, neque diu sit, ne nervi indurescant. Imponendum vero est cataplasma quod refrigeret: neque tamen in hoc ipso diu permanendum sed ad ea transeundum, quæ sic reprimunt ut emolliant. [De Re Med. lib. IV. cap. XXIV.] I consider the estimation in which Celsus held the cold treatment of the more importance, because he appears to have paid much attention to the practical uses of cold in other diseases; hence the *coincidence* is of greater value.

It is, however, undeniable that we have experience to go upon, amounting to positive proof, that the application of cold, in several cases of gout, has proved very beneficial in its consequences. Mr. Pope says that it has acted like a charm, producing the most instantaneous and pleasing effects. But in objection, cases of gout are adduced, in which the same treatment is said to have been the cause of imminent danger. Now, to avoid all unnecessary discussion, I think it may be *conceded that these cases are proofs of the pernicious effects of cold,* in particular states of the constitution, and in particular forms of the disease. But in the early periods of gout, when our resources for palliation or cure can vigorously be put in practice, the form of the disease and state of the constitution are, in a practical point of view, entirely distinct. If gout did not assume most important changes in its nature and character, during its progress, the effect of any agent upon the disease would be at all times steady and constant; and no possible reason could be assigned under these circumstances for any variation of treatment whatever. But as gout, in gaining upon the constitution, undergoes changes from one complicated form to another, a multiplicity of resources is absolutely necessary, and practice without discrimination is out of the question. In different patients, we find all the difference of age and youth; of great bodily strength, and of a broken constitution. So that this, not merely in the selection of cold, the condition of the patient, and the state of the disease, must be scrupulously regarded; for it is in this way only, that the propriety or impropriety of employing any one of our routine of remedies can be determined upon. To decide, therefore, upon the utility of a remedy, and to declare it dangerous and destructive in every stage of a disease, from its supposed effects in two or three cases, without giving the changes in its character and nature, which take place during its progress, *one thought,* is in the highest degree reprehensible,

ble. Now, it is in the early periods of gout, when the constitution is not undermined by repeated attacks, that it is our business to endeavour to diminish the severity of symptoms, and to shorten the duration of the disease by the topical application of cold. The practice, under these circumstances, seems perfectly secure. The danger of retrocession, as I before observed, arises from the natural progress of the disease, and is a *motive* to shorten its existence by every effort we can command. I appeal to the history of the disease for the proof of this position. The stomach and the extremities are the parts under consideration. We see a paroxysm of gout is connected with derangement of the stomach, and a peculiar inflammation of the joints of the extremities. The affection of the stomach is frequently in the first paroxysms altogether trifling. The paroxysms, by frequent recurrences, increase in violence and duration. The inflammation of the joints becomes more severe and extensive, and the large joints at last are affected. The derangement of the stomach increases in the number and aggravation of its symptoms; *gastrodynia* at length comes on, and *withdraws* the inflammation of the joints, on the principle of equilibrium of action, [under which we *arrange* a number of facts—See Burns, on Inflammation] and this state of the disease is called by the hypothetical and misleading phrase, Retrocedent Gout. I appeal to the history of the disease, which we know is drawn up with exquisite minuteness and accuracy, for the proof of these positions, and we there find proof, in a greater variety than we could perhaps have anticipated, that gastrodynia arises, independently of the morbid state of the joints, in so far as it *causes* the morbid state to subside. We see clearly that gastrodynia springs up, as it were, sua sponte, and that it would continue to do so merely from the progress of the disease, if the morbid state of the joints was not one of the symptoms of it. In short, that the disappearance of the local inflammation in retrocedent gout is the *effect* of gastrodynia.

This pathological view I take of Retrocedent Gout, is in consonance with the whole history of the disease. In the commencement of gout, we see it more especially produce direct effects upon the stomach; for dyspepsia is the first symptom evolved. In the progress of gout, we see its direct influence increase most considerably, pro ratâ parte, upon the stomach, till it in a manner annihilates all its functions, and then fixes upon it altogether and forms the atonic state of gout. Why then should gastrodynia

dynia alone be reduced to *such extremities* as to require the agency of the great toe! Thus we find, that gastrodynia is but a consequence of the natural progress of the disease; and that a *repetition of paroxysms* MUST be the essential cause of it, because it *never* takes place in the early periods of the disease, when all other *circumstances, except the effects of repetition,* are in every respect the same at its commencement as at its termination. Thus we see, that error in pathology has been held forth to perpetuate imperfection of practice; and, that the discriminate employment of cold has been forbidden, because the nature of retrocedent gout has not been rightly considered. Why encourage the continuance of a paroxysm from the first, when every case of gout is an example before our eyes, that every paroxysm, according to its severity and duration, increases the predisposition? Hence, the progress of the disease is marked with increasing force and frequency of paroxysms? Hence they are attended with gastrodynia. Why suffer the disease to become unmanageable, and not early and unremittingly use our utmost exertions to suppress the progress of "an excruciating malady; which otherwisse grows withh our years, and curtails, or renders miserable, the latter half or third of the lives of those who are subject to it?" [Zoonomia.] The advocates for the employment of cold in the early periods of gout, contend for nothing more; they bear in mind, that every paroxysm increases predisposition; and see, that what is gained by mortifying restraints, submitted to for a tedious time, in the intervals may be all lost, by continuance and severity of the paroxysm; they recommend a remedy which promises something to shorten it and mitigate its symptoms. For doing so, they are reprobated with insinuating charges of practising with the instrument of death; of forgetting the knowledge of the animal œconomy; and almost of empiricism.

I fear, Gentlemen, that I have indulged in too much diffuseness; but it will be recollected, that I have adopted pathological views, in some degree peculiar to myself; and, as they appear of some practical importance, I was willing to unfold them with perspicuity if possible; the desire of being intelligible, and the want of leisure, I trust, will apologise for any superfluity or incorrectness of language.

I will just add, that the external application of cold, will prove of utility after the paroxysm is gone off, by restoring

storing the tone of the parts. Ablution with cold water, has, in this way, proved serviceable to old podagrics, and is recommended in this view by Doctor Gregory, the Professor of the Practice of Physic.

It will be understood, that I consider it improper to repel the local inflammation of gout in patients who have been the victims of it for any considerable length of time. The connection between the stomach and gouty joints becomes intimate; the predisposition of the stomach becomes great, so that the slightest circumstance will excite it to diseases; the morbid change of the stomach, from repeated attacks, becomes more and more exquisite; the gout fluctuates between the stomach and the small joints. Even before gout reaches this extreme form, I apprehend it is not advisable to dispel the topical inflammation. I am, &c.

July 14, 1807. P. O.

P. S. In my last paper, for *Douteau* read *Pouteau.*

Botanical Description of British Plants.

[Continued from Vol. xvii. page 558—566.]

19. Prunella. *P. vulgaris. Brunella vulgaris. B. major fol. non dissecto.*

Ang. Common Self-heal.

Gen. Desc. Filaments forked, one of the divisions bearing anthers. Summit cloven.

Spec. Desc. *Leaves* egg-oblong, serrated, on leaf-st., opposite. *Cal.* up. lip lopped, three-toothed, seven ribbed. *Bloss.* blue, purple, or white; *up. lip* slightly notched; *lower* mid. segm. jagged. *Sum.* segm. rolled back. *Stem.* in sunny situations trailing, a finger long; in woods upright, a foot high; thinly hairy. *Meadows, pastures.* Bloss. August.

Use. It is *astringent* and *vulnary,* but it is rarely used at present, except by country people; by them it is bruised and applied to fresh wounds; they take it also in broths and apozems for *spitting of blood;* and, in *bloody flux* and other *hæmorrhages,* they use it by way of injection.—*Lightfoot.*

Didynamia. Angiosphermia.

20. Euphrasia. *E. officinalis.*

Ang. Eyebright. *Gen-*

Gen. Desc. Cal. four-cleft, cylindrical. Anthers, the lower ones with one thorny to be at the base. Caps. two-celled, egg-oblong. Seeds few, leaning backwards.

Spec. Desc. Leaves egg-shaped, streaked, sharply toothed, sitting, mostly opposite. *Bloss.* bluish white; upper-lip, cloven, segm. three-toothed, streaked with purple; lower-lip, segm. cloven; mid. segm. with a yellow blotch; lat. seg. with three purple lines. *Heaths, dry grounds,* Bl. July, September.

Use. It is a weak *astringent*; it was formerly in repute as a remedy for impaired vision; especially in eyes weakened by long exertion, and those that are dim and watery, as in a senile state; strong testimonies are offered of its efficacy at very advanced ages; but not one in modern practice. The usual mode of external application was the juice mixed with wine and a little honey. It is constantly used by the Icelanders; and is recommended also in the *jaundice.—Woodville.* It will not grow but when surrounded by plants taller than itself.—Cows, horses, sheep, and goats eat it; swine refuse it.—*Withering.*

21. Pedicularis. *P. palustris.*

Ang. Marsh lousewort.

Gen. Desc. Cal. five-cleft. Caps. two-celled, sharp pointed, slanting. Seeds few, coated.

Spec. Desc. Stem. branched, 1 foot high, angular, purplish. *Leaves* winged, leafits wing-cleft. *Flowers* solitary, axillary, purple, sometimes white; helmet a little tooth on each side; lip slanting. Cal. two-lipped, crested with callous dots. *Marshes, &c.* Bl. June, July.

Use. This is a very unwelcome guest in meadows, being very disagreeable to cattle. Goats eat it; swine are not fond of it; horses, cows and sheep refuse it.—*Withering.*

22. Pedicularis. *P. sylvatica.*

Ang. Common lousewort.

Gen. Desc. As above.

Spec. Desc. Stem. branched, very short. Cal. oblong, angular, smooth, green within; purplish without, segm. toothed. *Bloss.* lip neat-shaped, purple, slenderer than cal. tube compressed. *Branches* trailing. *Wet pastures, heaths.* Bl. June, July.

Use. The expressed juice, or a decoction of this plant has been used with advantage as an injection for *sinuous ulcers.*—It is said, that if the healthiest flock of sheep be fed with it they become scabby and scurfy in a short

time;

time; the wool will get loose, and they will be over-run with vermin.—Cows and swine refuse it.—*Withering.*

23. Antirrhinum. *A. Elatine.*

Ang. Sharp-pointed Fluellin, or snap-dragon.

Gen. Desc. Cal. five-div. Bloss. bulging at the base, or ending in a spur. Caps. two-celled, many-seeded, opening at the top, and the divisions bent back.

Spec, Desc. *Leaves* halberd-shaped, alternate; lower ones opposite. *Fruit-st.* white, in flower expanding, then declining. *Stem.* trailing. *Corn-fields.* Bl. Aug. Oct.

Use. This is considerably more bitter than the other species of it; and it is said to have been used successfully in cases of *foul ulcers,* and in *cutaneous eruptions.*

24. Antirrhinum. *A. linaria.*

Ang. Yellow toad-flax. Snap-dragon. Butter and eggs.

Gen. Desc. *As above.*

Spec. Desc. *Leaves* spear-strap-shaped, crowded, alternate. *Stem.* upright, smooth *spikes* terminating, sitting. *Flowers* tiled. *Bloss.* petals woolley, orange; *lower-lip,* segm. circular, mid. segm. much smaller, projecting part orange, woolly; the rest pale yellow, smooth. *Nect.* long, awl-shaped. *Barren fields, road sides.* Bl. July, Sept.

Note. There are four varieties, for which, particularly Pesoria, see Bot. Arr. l. c.

Use. An ointment prepared from the leaves, and invented by Dr. Wolph, Physician to the Landgrave of Hesse, has been used in the *piles,* and it is said to afford relief.—*Light.*—*With.* The leaves in infusion are *diuretic* and *purgative,* and are recommended in *dropsies.* It has also been used in *jaundice.* An infusion of the flowers is said to be very efficacious in cutaneous disorders.—*Woodville.* The expressed juice mixed with milk is a poison to flies, and the smell of the flowers has the same effect on them. Cows, horses and swine refuse it. Sheep and goats are not fond of it.—*Withering.*

25. Scrophularia. *S. nodosa.*

Ang. Great fig-wort. Kernel-wort. Knobby-rooted fig-wort.

Gen. Desc. Cal. five-cleft. Bloss, five-div. tube globula; lower segment reflected. Caps. two-celled, partition double.

Spec. Desc. *Leaves* oblong, heart-shaped, three-fibred at the base. Stem sharp-cornered. *Cal.* toothed and membraneous. *Bloss.* tube filled with honey; *upper segm.* purple, the rest pale green: *two-lat.* expanding, *lower* rolled back. *Woods, moist hedges,* Bl. July. *Use.*

Use. This plant is hardly known in modern practice; but its rank smell, and the bitter taste of the leaves seem to indicate some active properties.—Swine infected with the *scab*, have been cured by being washed with a decoction of the leaves.—Wasps greatly resort to the flowers.—Goats eat it; cows, horses, sheep and swine refuse it.—*Withering.*

26. DIGITALIS. *D. purpurea. Virgia regia major.*

Ang. Fox-glove.

Gen. Desc. Cal. five-div. Bloss. bell-shaped, five-cleft, bellying. Caps. egg-shaped, two-celled, many-seeded.

Spec. Desc. *Cal.* segm. egg-shaped, acute. *Bloss.* blunt, up.-lip. nearly entire; purple, mottled within; inversely conical, swelling on the innerside; the bellying part with spots like little eyes. *Leaves* sitting, wrinkled, scalloped, teeth small, deep; a net-work of fleshy veins underneath, a little woolly. *Flowers* in long terminating spikes, all pointing one way. *Hedge banks, hills, in dry soil, but rarely in flat ground.* BL. June, July.

Use. The leaves, which have a nauseous bitter taste, have long been used externally to *sores* and *scrophulous tumours* with considerable advantage. Internally this plant has been reckoned efficacious in *epilepsy, scrophula* and *phthisis*; but from want of caution it was found a dangerous remedy. It was discovered by Dr. Withering to be a powerful diuretic, and has been successfully used by him, and by succeeding practitioners in the cure of the dropsy; in which, under certain precautions, it is a valuable and important medicine. *See Withering's Acc. of the Fox-glove pub.* 1785. But, administered with less attention or less skill, it was proved either useless or deleterious. *Mem. Med. Soc. vol. ii.* It has a very remarkable power of lowering the pulse.—*Woodville.* It is certainly a very active medicine, and seems lately to have attracted more attention than modern practice was heretofore accustomed to bestow on it. (*See Beddoes on Pulmonary Consumption. Ferriar on Digitalis, &c.* Six or seven spoonfuls of the decoction of the leaves are violently *emetic* and *cathartic.* It is said to be useful in *scrophulous* cases taken inwardly for some time; and the bruised leaves, or an ointment made of them, applied outwardly.—*Lightfoot.*

CLASS. XV. TETRADYNAMIA.

Tetradynamia. Siliculosa.

1. MOENCHIA. *M. sativa. Myogrum sativum.*

Ang. Gold of pleasure. Common camline.

Gen'

Gen. Desc. Pouch entire, egg-shaped, crowned with the style, valves rather convex, parallel to the partition; cells with many seeds.

Spec. Desc. *Pouches* inversely egg-shaped, on long fruit-st. each side bellying out, but with a cavity pressed inwards, which disappears by cultivation. *Stem.* angular at top, slightly hairy, cloathed with leaves. *Leaves* alternate, spear-shaped, (arrow-sh. at base) half embracing. Stem, slightly toothed, hairy. *Bloss.* yellow.—*Corn and flax-fields.* Bl. May, June.

Use. This plant is an object of cultivation in Germany, for the sake of an expressed oil from the seeds, which is used by the inhabitants for medicinal, culinary and œconomical purposes. The seeds are a favourite food with geese. Horses, cows, goats and sheep eat it.—*Withering.*

2. Crambe. *C. maritima.*

Ang. Sea colewort. Cliff kale.

Gen. Desc. The four longer filaments cloven at top, one of the clefts bearing the anther. Seed-vessel simple, globular, deciduous.

Spec. Desc. *Stems* many, spreading, branched, smooth. *Root-leaves* on leaf-st. v. large, spreading on the ground, waved, jagged and indented and curled, smooth, tea-green, tinged with purple. *Stem-l.* sitting, fleshy, glaucous, indented and curled, smooth. *Pouch* at first egg-shaped, afterwards nearly globular. *Bloss.* large white, claws often purple both of petals and filaments. *Sandy sea shores.* Bl. May, June.

Use. The young and tender leaves are boiled as cabbage, or when first shooting are blanched and eaten as asparagus; but when full grown, they occasion giddiness. Horses, cows, goats and swine eat it.—*Withering.*

3. Isatis. *I. tinctoria.*

Ang. Wildwood.

Gen. Desc. Pouch simple, oval spear-shaped, compressed, one-celled, one-seeded, crowned by the style.

Spec. Desc. *Pouches* oblong, pendant, on slender fruit-st. chesnut-colour. *Root-leaves* scalloped, *stem-l.* arrow-shaped. *Stem* branched, woody. *Calyx* yellow. *Petals* yellow, notched at the end. *Corn-fields, rather rare.* Bl. June, July.

Use. This plant is much used by dyers for its *blue* colour; and it is the basis of many other colours; it is cultivated for their use. With the juice of this plant, it is said that the ancient Britons painted their bodies, to render themselves more terrible to their enemies. Cows eat it; horses, sheep and goats refuse it.—*Withering.*

4. Lepidium. *L. latifolium.*

Ang. Dittander pepper-wort. Poorman's pepper. Common dittander.

Gen. Desc. Pouch notched, compressed; valves sharply keeled. Cells one-seeded.

Spec. Desc. *Leaves* egg-spear-shaped, entire, serrated. *Stem* branched, zigzag. *Flowers* numerous, in panicles, white.—*Meadows and pastures.* Bl. June, July.

Use. This is one of the acrid *antiscorbutics*; and was formerly used in the place of *Horse-raddish.* An infusion of it is emetic. *Withering.*

5. Thlaspi. *T. arvense.*

Ang. Treacle mustard. Penny cress.

Gen. Desc. Pouch inversely heart-shaped, notched; valves like a keeled boat, often winged with a border; cells many-seeded.

Spec. Desc. *Pouches* round, flat. *Leaves* oblong, toothed, smooth, arrow-shaped at the base, embracing the stem. *Stem* 2 feet high, with seven or eight membranaceous edges. *Bloss.* white. *Corn fields, muddy soil.* Bl. June, July.

Use. The seeds of this plant have the acrimony of mustard; and the whole has something of a garlick flavor. When it is eaten by cows, it imparts a disagreeable taste to the milk.—Cows, goats, and swine eat it; horses and sheep refuse it.—*Withering.*

6. Thlaspi. *T. bursa pastoris.*

Ang. Shepherd's purse. Shepherd's pouch.

Gen. Desc. *As above.*

Spec. Desc. *Pouches* compressed, triangularly inversely heart-shaped, smooth, without a border. *Root-leaves* wing-cleft, sometimes entire. *Stem-leaves* entire, strap-spear-shaped, embracing the stem, fringed. *Bunches* long, flatted, terminating. *Cal.* hairy. *Petals* entire, white. *Anthers* woolly. *Summit* circular, fringed, concave. *Stem* 2 inches to 3 feet high. *Rubbish, road sides, walls, &c.* Bl. March, Sept.

Use. It is insipid to the taste; but it is recommended by many writers in *hæmorrhages* of all kinds, both as an internal or external application, either in man or beast.—*Lightfoot.*

(To be continued.)

CRITICAL ANALYSIS
OF THE
RECENT PUBLICATIONS
ON THE
DIFFERENT BRANCHES OF PHYSIC, SURGERY, AND MEDICAL PHILOSOPHY.

The Edinburgh Medical and Surgical Journal, No. XI.

Article 1.—*Biographical Sketch of Camper.*

As this celebrated professor has now been near 20 years dead, the rising generation may feel less interest in the few memoirs his life affords. Like many other philosophers, little more can be said of him, than what his works proclaim. "He seems, says the author of this Sketch, to have followed the common route among men of letters, and left few memorials of his happiness or misfortunes." This account might form a very proper introduction to a collection of his physiological works, and from such it has been extracted.*

Article 2.—*History of a Case of Introsusception, with Remarks on the Complaint.* By GEORGE LANGSTAFF, Surgeon, London.

THIS paper does the author nc inconsiderable credit; but we wish it had been more free from what is very expressively called *showeyness.* It is true, in the description of *introsusception,* in its divisions into the inner descending, the middle reflecting, and the external containing fold, and also the two angles of reflection: we have in the latter paragraph, a reference to a *representation* given by Mr. Hunter in the Chirurgical Transactions; but unless the reader turns to the passage, he will not be aware that the whole account is almost transcribed from that paper.

However, we must admire the modesty of the author, who conceives it "presumptuous in him, to comment on any of the remarks of that luminary, Mr. Hunter." If Mr. Hunter is to be considered as such a luminary, we conceive he must have had more sense than to be flattered by silent assent without comment, and would gladly have received a hint, especially in diseases, which, as our author observes, "belong more to the department of an apothecary than a surgeon." But if the disease, when not relieved by the efforts of Nature, admits of no remedy, it is of little consequence to distinguish it from inflammation, which Dr. Baillie has not attempted † to do. All that we can undertake, is to

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* Œuvre de Pierre Camper, Paris, 1803.

† Morbid Anatomy, 3d Edit. Page 200.

to abate inflammation, the better to enable Nature to accomplish the developement of the parts.

However, if a writer whom we thought worthy to be called a luminary, had proposed any other attempts, we should have hesitated before we expressed our regret, that "so universally and justly respected a name should be affixed to a proposal so manifestly absurd."

Article 3.—*Case of a Man who died in consequence of a Disease occasioned by what may in general be considered as a Mild Punishment.* By M. Burmester, Army Surgeon.

There is nothing very remarkable in this case, inasmuch as death by mortification, has often followed injuries much less considerable than the infliction of *two hundred and fifty* military lashes. The paper is on other accounts valuable, and the motives of the author extremely praise worthy. It would have added something to the interest we felt in the perusal, had an account been given of the temper and disposition of the subject. We are persuaded that the disgrace attending such a punishment, would in many be a sufficient means of accounting for so fatal an issue.

Article 4.—*Account of the Ockow, a Chinese Remedy for Complaints in the Breast, with Observations on the Use of Digitalis.* By A. Baildon, M. D. London.

The author supposes the first remedy to be animal gluten. One remark on digitalis, from the effects he found in his own person, will we hope be attended to by those practitioners who are attached to this powerful remedy.

"I suspect, says he, that the difference in the accounts we have of it by different practitioners, has arisen from a circumstance very clearly marked in my case, and which strongly points out the great care and attention necessary in exhibiting this very active drug. I observed, and repeated the experiment a great many times, that after the digitalis had taken effect, *my pulse was not lessened in frequency when I stood erect;* it was then upwards of 100. When I sat down, it fell considerably; when lying on my back, it fell much more. Thus, during the time it was at 40 when lying, it was about 75 when sitting, and above 100 when standing. This was invariably the case. When I turned on either side, it fell two or three, and intermitted.

"I have found the pulse to vary in this manner, in all the patients to whom I have given the digitalis to any extent. I need hardly point out the absolute necessity of carefully attending to this circumstance."

Article 5.—*On the Tic Douloureux, or Trismus Dolorificus.*

This article gives an account of two cases, in which Dr. Pierson succeeded in curing this very painful disease by mercurial salivation; a third, in which the patient died of the remedy; and a fourth, in which the patient declined its use.

Article 6.—

Article 6.—*Report on the Malignant Disease which prevailed in the City of New-York, in the Autumn of* 1805, *addressed to the Governor of the State of New-York.* By EDWARD MILLER, Resident Physician in the State of New-York.

THIS article, consisting of twenty-one pages, has already appeared in our Journal, No. 96, Vol. xvii. Page 97.

Article 7.—*Cases of Small-pox in the Fœtus.* By WILLIAM FORBES, Member of the Royal College of Surgeons, London.

THIS paper contains three cases very worthy of being recorded.—The first is of a woman, who at the sixth month of her pregnancy passed through confluent small-pox, and was afterwards delivered at the natural period. It appears by the future history of the child, that it was not infected *in utero*, which may account for the mother going her full time.

The second is, we believe, the first instance on record, of a child born with small-pox, and surviving. We wish the case had been related with more minuteness, as to the periods of the disease in the mother and child, connected with the birth of the latter.

In the third case, the mother had passed through the small-pox in her infancy. During pregnancy, she nursed a son with small-pox, who died. The child born, had small-pox pustules at the time of its birth. This was in the year 1788, and at this time, being in her nineteenth year, she has on her face and other parts of the body incontestible proofs of the disease. By this, it appears probable, as has been remarked by Dr. Adams, that the appearance of pock-marks in the face only, is to be ascribed to the greater inflammation attending pustules in that part, from its receiving the first shock of the disease, consequently that in the fœtus every part being similarly circumstanced, will receive the impression at the same time, and in the same manner.

In both these cases, if the author has any further memoranda relative to the dates of the different events, or the degree in which the children were affected, they will add much to the value of his communication.

Article 8.—*Report of the General Hospital, near Nottingham, from March* 25, 1806, *to March* 25, 1807. By JAMES CLARKE, M. D. one of the Physicians to the Charity.

THE original articles finish with a short conclusion to the Enquirer's paper on the Royal Touch.

We are truly sorry to be obliged to remark the striking difference in the *Critical Analysis*. It requires no ingenuity to see that those venerable names who did so much credit to the *Annals*, have relinquished that important office. During *their* labours, we met with no criticisms, without stating the author's meaning; no unprovoked pertness where the intentions of their author were good; no surreptitious invasions of their author's matter delivered as their own. We would advise these truly respectable editors, no longer to shelter themselves under the veil of an anonymous publication.

Let them reflect on the dignity of their own character, and if the labour of reviewing is too considerable, at least inspect the productions of those whom they employ. Let them reflect on the disgrace which a contemporary Journal of the same meridian incurred by the partial manner in which medical articles were reviewed. Fond as the public may seem of a severity to which they are in no fear of being exposed, there are limits which may be exceeded. The editor of the Edinburgh Review seems conscious that he can no longer trust his writers with medical works; and it is notorious, that the only article of that description, which has for some time appeared, was written by himself, though not of the profession. We forbear to dwell on so unpleasant a subject; but the respect we bear the profession, and the high opinion we entertain of the well known editors of the work before us, oblige to say thus much, and we sincerely hope it will not be necessary to say more.

Dissertations on Man, Philosophical, Physiological, and Political. By J. Jarrold, M. D. 8vo.

This work being intended as a subject of political œconomy, it may be thought, might have passed unnoticed in our Journal. But the physiological part contains some remarks entirely new, and not less ingenious. We feel ourselves, therefore, impelled to bring them before the faculty, that they may meet with that general attention from individual observations, by which only they can be confirmed or refuted.

Few of our readers can be ignorant of the valuable Treatise on Population presented to the public by the Rev. Mr. Malthus. One very important part of that gentleman's doctrine seems to explain the laws by which the population of mankind is kept under by vice and misery, and even to show that such means are not unnecessary to prevent the race from eating up one another. Dr. Jarrold's view of the subject is infinitely more consolatory, and, in our opinion, not less satisfactory to common sense than honourable to that Fountain of good, from whom only natural laws can originate. After considering the various causes which prevent population in those different countries in which Mr. Malthus has traced them, and pointing out various errors of that gentleman, our author enters on the subject as a physiological question.

He first shows, that the longevity of the Antediluvians was absolutely necessary, in order that arts of any kind useful to man, might be brought to such a state as to facilitate their future improvement; confirms the tradition, that after the flood human life was gradually shortened till it arrived at the period marked out by David, which he conceives may still be considered as the proper medium, where no particular events tend to shorten its duration. He then enters on the checks which are opposed to a redundant population, and shows

shows that they are no way inconsistent with the virtue, happiness, and good order of society.

Women, he remarks, as well as other animals, are only capable of fecundation at certain periods. These periods are more various in all animals in proportion as they become more domesticated, and probably in women, as their mode of life becomes more civilized or artificial. Should any occurrence, bodily or mental, happen at such a period, the probability is shown that it may supercede an event which would otherwise take place by interrupting those gradual changes in the constitution which are necessary, in order to render it prolific. Various other causes are shown to be more or less productive of sterility; but most of all, it would seem, that whether the mind is occupied in its own distresses, or deeply engaged in any other pursuits, whether of science or ambition, the effect on the mere animal organs is the same.

"In civilized society," says our author, "instances are common of a family that promised to be numerous being stopped in its progress by some circumstance of distress preying on the minds of the parents. It seldom happens that an honest man is a parent in the year in which he becomes a bankrupt.

"There is, in this and other countries, a certain class of unhappy persons, in whom virtue is not blended with misfortune, or a stained character the effect of unavoidable circumstances, which still more unequivocally shows the influence of the mind in preventing pregnancy, I mean, that of the prostitute. It is well known that a prostitute is seldom a mother, which is usually attributed to promiscuous intercourse, but this is not the cause: to suppose that a young woman at once leaves the paths of virtue and the protection of her parents for infamy, disease and want, is as unreasonable as it is unjust; language, offensive to the ear of modesty, is first heard and endured, and afterwards the life by degrees becomes corrupt. At the very outset of a course of vice, whilst perhaps only an individual is a party in the crime, barrenness is almost as common as in the more openly profligate. To state a case; a woman lives with her paramour, the ceremony only of a public acknowledgment is not complied with to constitute them man and wife: No, they stand in no such relation; the laws of the country are not observed, for the express purpose that this relationship may never be felt. Theirs is an union of criminal desires, not of honourable motives: the crime constitutes their happiness. Were a law passed, by which such conduct was made to constitute marriage, the principle of their union would be dissolved: the source of such happiness is personal gratification, the source of happiness in marriage is personal worth. The interests of a mistress are centered in herself; abandoned by her own sex, and degraded by the other, the objects of her attention are as limited as those of a savage; and like a savage she spends her days, in fanning a passion, which, the more it reigns, the

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the more despicable she becomes, and the more disqualified for being a mother.

"That the class of Women of which I have been speaking owe their sterility to the influence of their minds, is considerably strengthened by the consideration, that promiscuous intercourse is not of itself a hinderance to pregnancy. At Otaheite, and many other places, where the manners of the people admit of this practice without incurring disgrace, no check to population follows: they have no proper sense of shame; their conduct does not appear to them corrupt; their intercourse is precisely that of brutes, and brutes are never sterile because of promiscuous intercourse; it has no injurious effect in the propagation of animals.

"In Europe the female character is held in the highest estimation, and is as sacred as life itself; but at Otaheite, or among savages, if virtue has a name, the sentiment is wholly unknown: a sense of decency characterizes civilization. In Europe the female takes alarm at the most distant insinuation, and days of the severest conflict precede and accompany a dissolute life; the mind is never at rest: but the unrestrained manners of an unenlightened people are never checked by reflection. Unrestrained manners in an European are not the mere indulgence of animal instinct, they imply the triumph of depravity over virtue and religion; the struggle is severe: it is the mind that is conquered; it had modelled the face to be an index of itself, the index remains, but the character it expresses is changed: the new aspect given by depravity demonstrates the influence the mind has over the body. If the mind affects the external character, it doubtless biasses the constitution."

Our author next considers the state of the mind as influencing the constitution, without any particular view to moral depravity, or the common causes of abject distress, and by a happy quotation from the illustrious Adam Smith, shows, that the difficulties by which a family is continued, multiply in proportion as a state advances to civilization.

"It is," says Dr. J. "a familiar fact, that the higher class is unproductive: but the important part of the fact is, that this circumstance is limited to civilized nations; it extends no further than where superiority in rank implies superior information. The chiefs of a nation of shepherds are not unprolific; in all nations in that state, or even advanced a step further, genealogies reaching down many centuries are common. "I cannot help remarking it," says Dr. Smith, "that very old families, such as have possessed some considerable estate from father to son for many successive generations, are very rare in commercial countries. In countries which have little commerce, on the contrary, such as Wales, or the Highlands of Scotland, they are very common. The Arabian historians seem to be all full of genealogies: and there is a history, written by a Tartar, Kham, which has been translated into several European languages, and which contains scarcely any

any thing else: a proof that ancient families are very common among those nations." *Wealth of Nations, v. 2, p. 129.*

"Such authority, for the general fact, may be considered as conclusive, but the reasoning admits of doubt: the change of property in a commercial country is certainly frequent; but it is not wholly in consequence of the rise and fall of fortunes which commerce gives birth to. Athens was not a commercial city, nor Berne, and yet old families were rare. The nobility of this kingdom are above the influence of commerce, yet they cannot boast of estates being many centuries in their families. It is not from commerce only that such events originate; they must have another cause. A commercial country is always civilized; commerce is in part the cause and the consequence of civilization, but the uncertainty that attends it is not the sole occasion of the frequent changes of property. Estates made hereditary often want an heir, and this I apprehend to be the principal reason that families hold large estates for so short a time. Those who enjoy any rank in a civilized country, who stand at its head, either in intellect or in power, stretch their capacity to the utmost, that they may acquit themselves with credit in the stations they fill: this exertion of the mind is, in the view I take of the subject, the efficient cause of the few generations an estate is enjoyed by such a family, or rather that such a family exists to possess it."

After this, we have some ingenious remarks on the gradual effects produced on the human figure and intellect, in proportion as bodily prowess or mental qualifications are more attended to by being more valuable to the possessor; but we cannot refrain from copying the conclusion of this chapter, as it shows the object of the author in a very striking point of view.

"There are many estates enjoyed by families that possessed them at the Norman conquest, but such families have never risen to greatness: they have not given birth to genius: it is in vain to enquire of them the improvements made even in agriculture, or of such as it is desirable should be made: they are men of precedents, not men of thought: the maxims of their ancestors guide them: they are useful in peopling a country, but not in civilizing it. Philosophers and poets, men of science or of taste, are not of this order; those who flourished a few generations back, live only in their works, their families are extinct. But it may be said, if this be the case, knowledge is a great evil, and the bulk of the people can never be informed. This remark will be attended to in another place; all I aim at, at present, is to establish the fact, that the most thoughtful people, taken as a body, are the least polific; by thoughtful, I mean any violent exercise of the mind, whether it be of a savage or a philosopher.

"Although this subject, from the nature of it, appears entirely confined to the human race, yet its principles are founded in the laws of nature, and may be supported by analogy. A hare, under the protection of a park, breeds earlier in the year, and yields

more young in a season, than one that has been subject to perpetual alarm; the food of both may be abundant, but the timidity of the animal stifles the voice of nature. A mare, that ranges undisturbed over a barren pasture, brings forth its foal every season; but the same mare, well fed in a stable, and trained to the chace, is wholly unproductive. An elephant, caught at the earliest period of its life, and domesticated, and treated in a way apparently agreeable to it, never brings forth young. The same may be said of most species of birds; if they are allowed a large room to fly in, and live on the food they are most fond of, yet they never build a nest. These facts are sufficient to show, that an increase of animal life depends on something more than animal passion, or the abounding of the means of subsistence."

What we have offered, though in some degree explanatory of the object pursued in this truly valuable performance, will give but a small estimate of the various striking and original ideas to be met with in the work.

We should regret that the chapter on hereditary diseases is so short, did it not give us an opportunity of transcribing the whole.

" Hereditary diseases do not naturally and necessarily attend the human race. Leprosy, madness, gout, scrofula, sprung out of certain habits and practices; they were all acquired, and probably will be eradicated. Leprosy, originating in the want of personal cleanliness, has already given way to the improvements which have taken place in that respect: linen is now substituted for woollen in many articles of dress, and other regulations equally friendly to cleanliness, have caused leprosy almost to disappear. Madness is an increasing malady; it has its origin in anxiety, or it is the consequence of other diseases; it is sometimes wholly recovered from, but unfortunately a tainted constitution propagates its like, and no means have hitherto been discovered to prevent it. Celibacy is a virtue in persons whose progenitors have been thus afflicted: and even when it does not reach as far as madness, it may give a peculiarity of character and talent. I have sometimes enquired into the family history of youths of extreme dissipation, and so often have found some part of the family at one period or other afflicted with madness, that I now seldom pass my judgment of such characters till I am first assured they are moral agents. I have little doubt that madness is the cause of more vice than is imagined. The subject merits the attention of moralists. What parent can answer for the conduct of his child if this be the case? for education is but a feeble check to the slightest madness. Madness is an evil so various in its mode of operation, so difficult to remove, so distressing in all its branches, that it ought to be a subject of general care that it does not spread: as it had an origin, it may also have a remedy; if this be not discovered, the families that are afflicted must become extinct, for the world cannot be moralized so long as madness exists. The gout is not a disease of the poor, and need not be of the rich; it enters a family, or leaves it, at pleasure. The

scrofula

scrofula is the offspring of a cold and fickle climate: the plan adopted in many families from the advice of Locke, of attempting to make the children hardy by thin clothing and spare diet, has in many instances given birth to this malady; it makes its appearance at the close of winter, and is suspended by the warmth of summer. As soon as the malady is noticed, recourse is had to the liberal use of wine, and by this means the external appearance of the disease is occasionally removed; but may it not be doubted whether consumption has not sometimes had its origin in this practice? would it not be more advisable to clothe and lodge children warm, to keep them on nutritious diet, and at the age of 10 or 12 gradually to give up this plan, and substitute a diet sufficiently nutritious but less stimulant? By this means the disease is combated before it has disturbed the system; the constitution is strengthened, consumption is guarded against, and injurious habits are prevented. A scrofulous family is always consumptive. Should a young person have been drinking freely of wine to repel any external mark that may appear, and should symptoms of consumption take place, instantly wine and bark, and those remedies calculated to remove scrofula, are abandoned for milk and vegetables. Plans so opposite cannot be proper. That any regulations in diet will eradicate the disease I do not expect, but a better acquaintance with the properties and influence of the climate, as the cause of the malady, which the active spirit of research of the present day warrants the expectation of, may lead to other and more effectual remedies.

" I have dwelt thus long on this subject for the sake of pointing out these diseases as not being necessarily connected with the constitution of man.

" Contrary to what might have been expected, hereditary diseases are great promoters of population; the world is considerably more full in consequence of their existence. The Jews, through whose veins leprosy flowed, increased faster than any other nation is said to have done. In a few districts in the north of Europe, scrofula prevails as much as leprosy did among the Jews, and children are as numerous. Particular families, subject to either of these diseases, are commonly very prolific; it counteracts, in a considerable measure, the influence of those causes that have a tendency to occasion sterility, and keeps in existence names that would otherwise have been extinct.

" The gout may be acquired in any country, and becomes hereditary; but in cold climates it is most frequent and most severe. The Spaniards, afflicted with this disease, frequently remove to Mexico, as I have been informed, and find some mitigation of their suffering in the warmth of the climate. The Greeks were not unacquainted with the gout, and their opinion accorded with ours, that devotion to Bacchus at once gave birth to the malady, and disposed the martyr to a continuation of homage. Families that possess hereditary gout are seldom childless.

Madness

"Madness is a disease not altogether of the same nature as those just mentioned; it respects the connection of the mind with the body: and I have not sufficient knowledge of the subject to advance a confident opinion respecting its influence on fecundity.

"From the above facts and observations, it is evident that certain diseases so far influence the body as to be propagated, which could not happen if the principle of increase was, as Mr. Malthus intimates, a given quantity: that which is liable to alteration may be increased or diminished. Hereditary diseases, experience teaches, hasten those evolutions in the system that are necessary to pregnancy. If six children be as many as a marriage of sound and healthy persons usually yields, eight is not a larger proportion for those who are diseased. I would not be meant to imply, that all numerous families are infected with disease, that is not the case; but I do contend, that an unsound constitution, in a civilized country, most commonly proves prolific."

Nothing can be more just than most of the observations contained in this chapter: but we feel ourselves under the necessity of making a few remarks. We could have been very glad if our author, with his usual precision, had defined in what degree we are to consider diseases as hereditary. If by the term, "eradicate the disease," we are to consider it like a root, then all the branches must be expected to partake of the properties. But it is certain, that in many families the same causes which excite such diseases in some individuals, produce no such effect in others; the illustration therefore should be avoided. We would further remark, that in our opinion Dr. Jarrold presumes too much, or is not sufficiently explicit in conceiving, that, as madness had an origin, it may have a remedy, or that the world cannot be moralized as long as madness exists. If by the first expression is meant, that by avoiding every increase in families in whom madness has been found, we may rid mankind of this calamity, we can only remind him, that it has been felt by a personage in this country, in whose family, had it existed before, it would have been impossible that such an event should have been unknown. Nor is it quite certain that moral restraints are feeble even in something more than slight cases of madness. There is not an inhabitant of Bedlam who is not awed by the presence of a keeper, nor scarcely a madman in the kingdom who is not cowed at the appearance of a strait waistcoat. In this commercial country certain offices are assigned to each individual, and certain remunerations are expected. Mad people are doomed to hospitals, or to other receptacles, the keepers of which have not always an interest in the recovery of their patients. Were the tempers of each to be studied by those who could devote their time to so humane a task, we doubt not that the dangers of madness would be as rare in this country as in others, in which an attention to the infirmities of mankind is not so universally a mercantile pursuit. There is another most important consideration, which we recommend to the ingenuity of Dr. Jarrold. Are we

bound

bound by any laws, human or divine, to watch with so much assiduity the prevention of suicide in maniacs? Madness of itself rarely shortens human life, yet it is certain that in this, as well as other diseases usually called hereditary, nature has made a larger provision as if for a certain waste. As the work before us professedly reverts very often to ultimate causes, we may be allowed to submit to the the writer, whether as he seems to admit that the prolific constitutions of certain families may be necessary on account of the short life of many of its individuals, that the *race* in such a community should not become extinct; so may it not be gradually improved by the premature death of many, who would be the means of perpetuating the malady? A writer, whose work has lately come under our notice, remarks of the leprosy, that the subjects, though they continue to live, are rendered incapable of propagation by the common progress of the disease; and it is remarked by some of the best writers, that cancerous women are usually barren. Such facts imply an attention in nature to fix some limits to the propagation of incurable diseases, and probably the same might be traced in a less proportion in diseases, which, though curable, mark a constitutional disposition to fall into them from very slight causes.

These considerations we leave to the ingenuity of our author, whose work abounds with so much good sense and accurate reasoning, that we cannot help expressing our gratitude for the satisfaction we have found in its perusal.

Observations on Medical Reform; illustrating the present Condition of Medical Science, Education, and Practice, throughout Great-Britain and Ireland; and proposing such Alterations therein, as appear most likely to succeed in Remedying the several Evils, which abound in this Profession, and which have, at length, become Subjects of universal Complaint; 8vo. Dublin.

MEDICAL Reform is so frequently talked of, and so little understood, that every attempt at explaining so complicated a subject deserves due attention. Before we enter on the present work, which takes up the question on a larger scale than most that has come before us, we shall offer a few remarks on a subject, concerning which, we may, hitherto, have appeared backward in expressing our sentiments.

Medicine has been very properly divided into the empirical and physical. The first is confined only to that experimental knowledge, by which a person having seen a malady cured by a certain remedy, conceives, that whenever such a malady occurs again, it will yield to the same remedy. The physician, on the contrary, is supposed to be so far conversant with the operations of Nature, as to ascertain the cause to which the remedy owed its success, and on any future occasion to judge of the propriety of using the same from his superior knowledge of such causes.

That

That both empirical and physical knowledge should be united cannot be questioned, nor, that to such an union we must look for the able and decided practitioner.

Another suggestion, which will arise in every reader's mind from the perusal of the work before us is, the too general impression, that the reverse of wrong must be right. In Great Britain, we are apt to complain of the union of pharmacy with any of the other branches. The author of these observations seems of the same opinion; but, whilst he wishes to confine the apothecary to the counter, he proposes, at the same time, that the surgeon and physician should be allowed to practice pharmacy, as far as extends to their own prescriptions. Now, let us ask, for a moment, what would be the consequence of such a law? The younger practitioners would dispense their own medicines, for which purpose they must have an assistant, of some description, at home; and are we certain, as their practice increased, that they would forego a profitable branch of their profession, which they could carry on with little trouble to themselves? Who then would remain to employ the apothecaries?

This opinion of our author seems to have originated in the manner in which the profession is divided in Ireland. The College of surgeons and physicians have interdicted their members from the practice of pharmacy, but the apothecary is unrestrained even from the important operations of surgery. No one can doubt the absurdity of this. But here, as in most other cases, it is much easier to object than to remedy.

It appears, by some prefatory remarks, that the OBSERVATIONS were first published in a Dublin Newspaper, and since collected in the form they are now offered to the public. They contain an account of the medical schools in the united kingdom, with many useful remarks; and others, which appear to us both hasty and crude. We shall not travel with the author through the whole, but content ourselves with a short extract from the concluding parts, and our remarks on the same.

"The legislature should by their decree acknowledge four departments as composing the medical profession, viz:—Physic, surgery, midwifry, and pharmacy.—To each of these a simple and efficient constitution should be given, of which I shall now attempt an epitome or outline.

"Physic should be committed exclusively to the Universities—of which a sufficient number should be constituted seminaries of medical education,—be empowered to examine into qualifications,—and to confer medical degrees.—Oxford and Cambridge universities for England, those of Edinburgh and Glasgow for Scotland, and the university of Dublin for Ireland, have been already shewn to be competent to this purpose.—These should, therefore, possess full and equal powers to execute this important trust; and no other medical schools should be acknowledged. Each university, so constituted, should possess the following professorships, as es-

sential

sential to the formation of a complete medical seminary—viz. a professorship of anatomy and surgery; a professorship of the institutes or theory of medicine, a course which comprises physiology, pathology, and therapeutics; a professorship of botany; a professorship of chemistry; a professorship of materia medica and pharmacy; and a professorship of the practice of physic. There should be an unappropriated professorship of clinical medicine. A professorship of natural history has been oftentimes suggested as necessary to a school of medicine; and certain acts of parliament, on the statute-book of this kingdom, actually establish it with this view. A professorship of midwifry, though hitherto, for reasons which are unexplained, utterly neglected in this kingdom, seems absolutely necessary."

In answer to this, we would ask, how is a practical art to be taught but by practice? and, however proper Edingburgh, Dublin, and even Glasgow, may be for the schools of the respective kingdoms in which they are situated; will any one say, that Oxford, or Cambridge should supersede London? Where can the "Practice of Physic" be so well taught, as where there are the greatest number of Hospitals? Where else, above all, can the Clinical Lectures be exhibited with any advantage?

As to the prevention of apothecaries from practising medicine, in our opinion the only error is, that they are not examined regarding their capacity for practising. Even the custom, as it now stands, is, in many respects, advantageous to the improvement of knowledge, though often injurious to individual patients. By the various practice which apothecaries have opportunities of seeing, they may often become the organs of information in consultation, and suggest hints, which the physicians may improve.

On the whole, though we are ready to admit, that this work contains much useful information, and is written in a very pleasing style, yet it comes, in our opinion, far short of that conviction, which the author, in some places, seems to demand.

An Account of the Practice of one of the Physicians of the Westminster General Dispensary, and of the Western Dispensary, from the 20th of June, to the 20th of July, 1807.

ACUTE DISEASES.	
Fever - - -	8
Catarrh - - -	3
Acute Rheumatism -	2
Pleurisy - - -	1
Erysipelas -	1
Inflammatory Sore Throat	1
Small-pox - -	1
Acute Diseases of Infants	5
Tic Douloureux -	1
Quotidian - -	2
Tertian - - -	1
CHRONIC DISEASES.	
Asthenia - - -	18

Cough

Cough and Dyspnœa -	12	Anasarca - -	4
Pulmonary Consumption	5	Paralysis - - -	2
Hæmoptoe - -	2	Lumbago - - -	6
Diarrhœa - - -	8	Chronic Rheumatism	4
Bilious Vomiting -	2	Hypochondriasis -	2
Dyspepsia - - -	4	Ulcerated Palate -	1
Hæmatemesis - -	1	Itch - - - -	3
Hæmorrhoids - -	1	Scabies - - -	1
Gastrodynia - -	5	Lepra - - -	1
Worms - - -	2	Chlorosis - - -	2
Rickets - - -	1	Amenorrhœa - -	4
Cephalalgia and Vertigo	7	Menorrhagia - -	5
Hydrocephalus Internus	1	Dysmenorrhœa -	1
Ascites - - -	1	Leucorrhœa - -	4

In giving a monthly Report of the diseases which fall under our immediate notice, in so short an interval of time, it must frequently happen, that no case shall occur, where practical remarks or novel observations can be made; and that no important or interesting complaints have prevailed. To those, however, who wish to compare the diseases which appear in this large metropolis from year to year, and from month to month, even the list of names will be interesting; for by comparing several of these lists made by different practitioners, an estimate may be formed of the general state of disease at any particular period. From the present Report, it will be seen that the number of diseases is diminished, and that no contagious or epidemic disorders prevail within the district specified. The cases referred to the head *Fever*, were slight; some of them were the common summer fever, or synochus; whilst the symptoms of the others were too mild to be designated by that term, which, though implying a disease less severe than typhus, yet gives us to expect more serious indisposition than that to which I allude.

The cases of Asthenia are numerous, and seem to be increasing. It may be proper to state, that under this head, I class those cases of debility, and nervous disorders, which cannot be referred to any specific disease. The symptoms of this complaint are, lassitude, pain in the head, back, and loins, and frequently over the whole body when exercised; drowsiness, and aversion from any exertion, with great prostration of strength. The pulse is feeble and frequently quicker than usual; respiration is sometimes difficult, and quick; not from any defect of the lungs,

lungs, but from deficiency of muscular power. The patient loses his appetite, and when food is taken, indigestion often follows. Dr. Willan, in his account of this complaint, has observed, "There is a faintness, or depression, referred to the stomach, which calls for a frequent supply of nourishment; but, as the craving is not seconded by a proportionate activity of the digestive powers, an overcharge soon takes place, and produces heart-burn, flatulency, violent pains of the stomach, or nausea, with bilious vomitings, and diarrhœa." These, however, are more frequently the characteristics of dyspepsia than of asthenia, in which they are not always present.

These symptoms are sometimes accompanied with despondency; dislike to accustomed pursuits; restlessness, and peevishness; the most gloomy ideas distress the mind and disturb the judgment; the action of the heart is affected, and palpitation and irregular pulsation, frequently alarm the patient; whilst disturbed sleep and unpleasant dreams, increase his general debility. This complaint, sometimes, is the consequence of preceding disorders; when this is not the case, it seems to be brought on by long continued fatigue; anxiety; disappointment; ennui; sedentary and unvarying occupations; hot weather; and living in close apartments without a free circulation of air. The most obstinate cases are in men who have laboured hard, and prematurely exhausted their vigour; and those who have lived temperately, and have thereby escaped dropsy and diseased livers, at the age of forty or fifty, are often the subjects of asthenia. Intemperance of every description also lays the foundation for it. Women soon after the cessation of the catamenia are frequently subject to this complaint; as also are men, who having led an active life, suddenly retire from their accustomed occupations; in such cases it is sometimes the precursor of hypochondriasis and insanity; and is preceded by ennui, which in men of a sanguine melancholy temperament, should be most resolutely combated on its first approach. Artists, and literary men, are very liable to asthenia; they labour with eagerness and alacrity, whilst any prospect of success opens before them; but often their exertions fail, and melancholy, anxiety, and despondency benumb their souls, and enfeeble their frame. Nothing is more debilitating than fruitless mental exercitation, attempting celebrity and not attaining it.

With respect to the treatment, little need be said; the principal thing is to ascertain the cause of the disease; which

which in people above the lower rank, will very frequently be found to be moral, and to require a considerable change in their mode of thinking; diversity of scene and the pursuit of every thing which can afford pleasing and cheerful ideas. The medicines should be of the tonic stimulating kind; and sea-bathing is highly beneficial; where that cannot be resorted to, the cold bath may be substituted with advantage.

SAMUEL FOTHERGILL.

Southampton Street, Strand, July 23, 1807.

INTELLIGENCE.

The *Senatus Academicus* of the University of *Edinburgh*, has conferred the degree of Doctor in Medicine on the following Gentlemen, after having gone through the appointed examinations, and publicly defended their inaugural dissertations.

OF SCOTLAND.

Joshua Henry Davison,	De Cynanche Tracheali.
Robert Tytler,	De Oxygenio.

FROM ENGLAND.

Henry Fearon,	De Dysenteria.
Joseph Ayre,	De Temperaturæ Effectibus.
Albert Perry Moss,	De Apoplexia.
Thomas Bent,	De Hepatitide Chronica.
David Plenderleath,	De Pneumonia.
George Green Spilsbury,	De Phthise Pulmonali.
John Thomson,	De Chorea.
John Armstrong,	De Causis Morborum Hydropicorum.
John M. B. Pigot,	De Morbis Ebrissorum.
Richard Maddock Hawley,	De Fonte Caloris.
Edward Parker Charlesworth,	De Scarlatina.
Robert Gooch,	De Rachitide.
William Shearman,	De Pneumonia.
W. Brackenbury Bousfield,	De Hydrocephalo Acuto.
Henry Snow,	De Rheumatismo Acuto.
Baldwin Wake,	De Typhi Remediis.
Samuel Liston,	De Calculo.
Joshua Ireland,	De Mania.

FROM IRELAND.

William Hudson,	De Rheumatismo Acuto.
William Stott,	De Hepatitide Acuto.
Robert Nixon,	De Voce Humana.
Peter Gilroy,	De Ictero.

David

David Barry,	De Phlegmasia Dolente Puerperarum.
Joseph Brownlow,	De Sanguinis Circulatione.
John Pigot,	De Principio Vitali.
Henry Mc Creery,	De Pneumonia.
Albert H. Callanan,	De Ascite.
Stephen Laur. O'Brien,	De Asthmate Spasmodico.
Eugene O'Neill.	De Hernia Inguinali.
Daniel Linehan,	De Respiratione.
Samuel Robinson,	De Pneumonia.
FROM PORTUGAL.	
Francis de Souza,	De Cataracta.
FROM AMERICA.	
James Low,	De Tetano.
FROM THE WEST INDIES.	
Thomas Kiniaid Wint,	De Amenorrhœa.
Benjamin Hardtman,	De Aura Humana.
Charles Farquharson,	De Phthise Pulmonali.

Dr. FRYDENBERG, of Iceland, has sent to the Society of Rural Economy of Copenhagen, a Memoir on the possibility of converting the *seetang* (a marine plant which abounds in the sea that washes the shore of that island, and other parts of the Danish dominions) into food fit for man. If the means he proposed for this purpose should prove successful, he will have the satisfaction of conferring an inestimable benefit on Iceland; a country so ill provided with alimentary productions, that all the precautions of Government are sometimes found ineffectual to preserve the inhabitants from the horrors of famine. Hitherto the *seetang* has been used in Denmark only for fuel, and in Norway for making kelp.

M. REDOWSKI, who had been nominated Botanist to the projected embassy from the court of Russia to China, is engaged in a very extensive botanical tour, at the Emperor's expence, thro' the most remote north-eastern districts of Asia, including the islands between that continent and Japan to the southward, and the coast of North America to the eastward. He will be accompanied by a Mathematician, who is to make astronomicel observations.

We have great satisfaction in announcing the humane. liberal, and honourable conduct of the Medical Practitioners of the City, and County of Worcester, respecting Vaccination. We trust that the example will be followed by every County, City, and Town in the United Kingdom:—not excepting LONDON.

Extract from the Worcester Journal, March 26, 1807.

We the undersigned, convinced, by the experience of many years, of the great and numerous advantages resulting from the *Inoculation of the Cow-pox*, both as it regards the preservation and happiness of individuals, and the interests of society, and which becomes

become more striking, when they are contrasted with the evils that unavoidably attend the inoculation of so contagious and dangerous a disease as the SMALL-POX; feel ourselves called upon to enter into the following RESOLUTION:

"We will not, under any circumstances or application whatever, inoculate, or sanction the inoculation for the SMALL-POX."

This resolution is undersigned by Cameron, Wilson, Barnet, Deane, M. D. D. — Cole, Sandford, Carden, Lambe, Rayment, Wilmore, Nash, Hill, Hebb, Romney, Wheeler, Blower, Ricketts, Jukes, Doughty, Horniblow, Smith, Wainwright, Shaw, Geust, T. Wainwright, Moss, Radley, Short, Cartwright, and F. Smith. It is also announced in the same paragraph, that "the surgeons of the WORCESTER INFIRMARY, continue to *vaccinate the poor gratis*, every Monday and Thursday morning, at the Infirmary.

The Small-pox has lately occasioned dreadful mortality in those parts of Arabia, bordering on the Persian Gulph. The son of SHEIK RAMAH was among the victims. The British Resident has profited by the alarm resulting from this fatal visitation, to introduce Vaccination. All the principal natives submitted to the process.

The same disease also raged last year throughout Malacca, with a virulence before unknown; not a single instance occurred of a recovery, when the infection had been caught in the natural mode. Dr. Loftie, the Garrison Surgeon, saved many lives, and has since very generally introduced the vaccine process, the natives flocking to him from all parts to be inoculated.

Among the numerous Societies and Institutions established in the metropolis, for the alleviation of diseases and inabilities among the poor, the *new societies* for relieving the diseases of the eye and ear, and the treatment of ruptures, deservedly excite very general attention, on account of the great and numerous benefits they confer on this class of invalids. A false modesty too often prolongs the sufferings, and not unfrequently proves the destruction of the ruptured of all ranks. The establishment of popular societies for the relief of these complaints, will have a powerful effect in banishing this false and dangerous delicacy, and thereby of saving many valuable lives that would otherwise be lost, or continue useless to society.

A Correspondent hints that we are often baffled in attempting to produce mercurial action in the system by the internal exhibition of mercury, on account of its proneness to disorder the bowels. He suggests that a free use of opium from the first will never fail to obviate this inconvenience; and as we are *compelled* on many occasions to resort to this internal mode of employing this specific, he deems it of considerable importance to be able to guard against disappointments.

Mr. PARKES has for some time been engaged in preparing a new edition of the Chemical Catechism. It will contain an account of all the new discoveries, with other very considerable additions and improvements.

At

Holland, a country where Medicine has been taught with such success, does not possess any work, the object of which is to apply physical science to the interpretation of the laws. For the purpose of supplying this desideratum, Dr. KEGLELOOT, a celebrated physician, has been engaged during the last four years in collecting materials from all the medical writers who had peculiarly devoted their talents to this branch of study, such as Frank, Arneman, Plenck, in Germany; Foderé and Mahon, in France; Vesace and Cardile, in Italy, &c. As the work is chiefly intended for the learned, the Doctor has written it in the Latin language. From the plan and known abilities of the Author, and the luminous developement of all the parts of his subject, it is confidently expected that it cannot fail meeting with the approbation of the Dutch government, as the most public and complete Treatise that has yet appeared on Medical Jurisprudence.

M. VAUQUELIN, Professor of Chemistry in the Museum of Natural History at Paris, has analyzed various Specimens of Ore from the famous Silver Mine of Guadal Canal, in Estremadura, and discovered in them platina, united with silver, copper, iron, antimony, arsenic, lead and sulphur, sometimes amounting to one tenth of the mass.

In the course of 1806, among the deaths in the extensive empire of Russia, there were

1	between	145 and 150	years of age.
1	——	130 and 135	——
4	——	125 and 130	——
6	——	120 and 125	——
32	——	115 and 120	——
26	——	110 and 115	——
86	——	105 and 110	——
137	——	100 and 105	——
1134	——	95 and 100	——

Dr. YOUNG, who has just published a Course of Lectures on Natural Philosophy, delivered at the Royal Institution, has begun to collect Materials for a Work, in a form nearly similar, relating to every Department of Medical Knowledge; it will be comparatively more concise than the above Lectures, in proportion to what has been written respecting Physic; but much more complete with regard to all that is known with certainty, and can be applied with utility.

Dr. CHEYNE is about to publish a Dissertation on *Hydrocephalus acutus*, or Dropsy in the Brain, illustrated by a Series of Clinical Cases and Dissections.

Dr. B. S. Barton, Professor of the Materia Medica in the University of Pennsylvania, is about to publish Elements of Zoology; or, Outlines of the Natural History of Animals.

An Experimental Inquiry into the Chemical and Medical Properties of the *Statice Lemonium* of Linnæus, has lately been published at New York, by Valentine Mott, President of the American Orsculapian Society.

Dr. Hosack, Professor of Botany and the Materia Medica in Columbia College, and F. R. S. of London, has recently printed a Catalogue of Plants contained in the Botanic Garden at Elgin, near New York.

At Edinburgh, in the beginning of November, Mr. Walker will commence a Course of Lectures on Physiology, or the Laws of Organic Existence.

The following useful Plan for VILLAGE or PARISH LIBRARIES has been circulated by some public-spirited Individuals, and as many of our Country Readers may have Opportunities to promote such Establishments, we do not consider it wholly foreign to the Business of our Journal to give it a Place.

"It is proposed to establish in every village or parish in the kingdom a small Library, consisting chiefly of Books of Agriculture, History, Modern Voyages and Travels, and other subjects of rational instruction and general utility.

"The Funds for commencing and maintaining such a Library, to be raised by a subscription of five shillings per quarter for three years, and of a half crown per quarter afterwards.

"The resident Clergyman, for the time being, to be President of the Society, and a Treasurer to be appointed annually from among the subscribers.

"The subscriptions to be received, the accounts to be kept, and the books to be circulated and registered by the Parish Clerk, or by the Parish Schoolmaster, who, besides having the use of the books for his own reading, is to be entitled to the fines.

"The books to be kept in the Vestry Room, at the house of the officiating clergyman, or at any other convenient place, in a room which shall be accessible to the subscribers.

"Quarterly meetings to be held of the subscribers at the place where the books are kept, when new books are to be ordered, accounts stated, and regulations formed.

"No book to be kept for reading more than a month, under the forfeiture of one penny per day afterwards; and no Magazine, Review, or pamphlet, to be kept more than five days under a similar penalty.

"The

"The first object of such a Society, should be to possess itself of the County Reports, and other Books published by the Board of Agriculture, of Gregory's Cyclopedia, some of Arrowsmith's Maps, Dickson's Agriculture, a System of Geography, Mavor's Universal History, Johnson's Dictionary, and Hume and Belsham's (the last revised edition) History of England. It should also begin to take in for periodical circulation, the Monthly Magazine, the Annals of Agriculture, the Oxford Review, and the Journal of Modern Voyages and Travels.

"The Library to be considered as the property of the subscribers, and of their resident heirs or successors, as long as they shall contiuue to pay their quarterly contributions within twelve months after they fall due; but any parishioner, may, at any time, be at liberty to become a reader of the library on paying three shillings for a single quarter.

"N. B. To establish such a Library, it seems only to be requisite that a fair copy of this plan should be affixed to the church door, that the Clergyman, or Parish-clerk should solicit the names of the chief parishioners; and as soon as a dozen have paid their first subscription, the Society must be considered as formed.—Should any Nobleman or Gentleman lend his countenance to the plan, and contribute a donation of ten or twenty pounds, its establishment could scarcely fail to be permanent."

NEW MEDICAL PUBLICATIONS.

A Letter containing some Observations on Fractures of the Lower Limbs; to which is added, an Account of a Contrivance to administer Cleanliness and Comfort to the Bed Ridden, &c. with Notes; by Sir James Earle. 8vo 3s. sewed

The Edinburgh Medical and Physical Dictionary; by Robert Morris, James Kendrick, and others. 2 vols. 4to. 4l. 4s. boards.

Index Plantarum, or an Alphabetical Arrangement of all the Genera and Species of Plants hitherto described, with Reference to Original Authorities for each Genus and Species, &c. &c. by W. B. Coyt. Vol. 1, 8vo 20s. boards.

MEDICAL OBITUARY.

At his house in Old Broad Street, aged 49, William Hamilton, M. D. one of the Physicians to the London Hospital.

In New-street, Spring Gardens, aged 76, John Wasdale, M. D. formerly of Carlisle.

At the Lodge, Hillingdon, Robert Freeman, Esq. M. D. aged 73.

East Indies.

At Bundlecund, Mr. Springal Jones, Assistant Surgeon.

At Dinapore, John Finn, M. D. Assistant Surgeon.

At

At Fort William, Mr. George Rixon, Assistant Surgeon; and Mr. W. H. Turner, Assistant Surgeon.

At Chatterpore, Mr. Michael O'Donaghoe, Assistant Surgeon.

At Serringapatam, Mr. Benjamin Humpage, Surgeon.

At Manantoddy, Mr. Richard Stone, Surgeon.

At Bombay, Mr. Gabriel Alvares, Assistant Surgeon; and Mr. Jones Grisdale, Surgeon.

At Sesoor, Mr. James Guild, Assistant Surgeon.

At Tannah, Mr. Archibald Little, Surgeon.

At Surat, Dr. Mc Kenzie, Surgeon in the East India Company's service.

At Calcutta, George Boyd, Esq. Principal Surgeon on the Bengal Establishment; and Mr. Andrew Stephens, Surgeon.

At Dinagapore, Mr. William Roe, Assistant Surgeon on the same Establishment.

At Prince of Wales's Island, Henry Williams Rumsey, Esq. M. D. aged 26, in the Hon. East India Company's service at that Presidency, of a contagious fever.

To CORRESPONDENTS.

We are much obliged to our numerous correspondents who have furnished us with additional proofs of the prophylactic powers of vaccination, and the consequently great decrease of mortality from the small-pox; but as the Report of the Royal College of Physicians of London, which comprise those of Dublin and Edinburgh, as well as those of the Royal Colleges of Surgeons of these cities, is now in the hands of all our readers, we think it unnecessary to publish particular reports.

We have also received, from our facetious correspondent, an anticipation of the observations which are to be expected from the *three noted, surviving, out-standing*, Antivaccinists, in their next publications, respecting the Report of the Royal College of Physicians. He takes it for granted that they will not suffer a verdict so decidedly against them, and delivered from such an authority, to pass without some notice in their usual style. This style he has attempted to imitate, and, as we think, with wonderful success. The diffidence, retiring modesty and humility of the little Doctor; the brilliant wit, sprightly vivacity, and logical acumen of the great Surgeon; the classic elegance, the refined polish, and the delightful perfume of the style of the great Doctor, are most happily pourtrayed; *sed nunc non erat his locus.*

The second part of Dr. Bellamy's case would have been published some months ago, but it has been unaccountably mislaid; we therefore request him to send us another copy.

Communications are received from Mr. Dinmore, Dr. Coxe, Dr. Kinglake, Mr. Okes, and Dr. Harrison.